



Sunoco Logistics



**Sunoco Pipeline L.P.
Facility Response Plan
PHMSA Sequence Number 724
Longview District Response Zone**

**Sunoco Partners Pipeline, L.P.
1818 Market Street, Suite 1500
Philadelphia, PA 19103
Revised September 2012**

Developed Under the Guidelines:
49 CFR Part 194 Subpart B Oil Spill Response Manual Appendix A
49 CFR Part 195 402 (e)

TABLE OF CONTENTS

	<u>Page</u>
1.0 INFORMATION SUMMARY.....	1
1.1 PURPOSE OF PLAN	1
1.2 RESPONSE ZONE INFORMATION SUMMARY	1
Table 1.1 Response Zone Information Summary.....	2
Table 1.2 Description of Line Segments/Stations.....	3
1.3 OPERATOR CERTIFICATION.....	7
2.0 NOTIFICATION PROCEDURES	8
2.1 NOTIFICATION OVERVIEW	8
2.2 INFORMATION REQUIRED FOR NOTIFICATION	8
Table 2.1 Facility Response Team Contact Information.....	9
Table 2.2 Emergency Response Personnel Contact Info.....	10
Table 2.3 Regulatory Agency Contact Information.....	11
Table 2.4 Emergency Services Contact Information.....	15
Table 2.5 Contractor Contact Information.....	17
3.0 SPILL DETECTION AND ON-SCENE SPILL MITIGATION PROCEDURES	18
3.1 SPILL DETECTION	21
3.2 SPILL MITIGATION PROCEDURES.....	21
Table 3.1 Spill Mitigation Procedures... ..	21
3.3 RESPONSE EQUIPMENT	22
4.0 RESPONSE ACTIVITIES.....	23
4.1 SPILL RESPONSE ACTION CHECKLIST.....	23
Table 4.1 Spill Response Action Checklist.....	24
4.2 SPILL TRACKING AND SURVEILLANCE	26
Table 4.2 Spill Tracking and Surveillance.....	27
4.3 ESTIMATING SPILL VOLUMES	29
Table 4.3 Oil Thickness Estimation Chart.....	29
4.4 EMERGENCY RESPONSE PERSONNEL	30
4.5 INCIDENT COMMAND SYSTEM/UNIFIED COMMAND	30
5.0 TRAINING PROCEDURES	31
5.1 EXERCISE REQUIREMENTS AND SCHEDULES.....	31
5.2 POST INCIDENT REVIEW	31
Table 5.1 Standard Incident Debriefing Form.. ..	32
5.3 TRAINING PROGRAM	33
Table 5.2 Training Requirements.....	33

TABLE OF CONTENTS (Continued)

	<u>Page</u>
6.0	WORST CASE DISCHARGE SUMMARY36
6.1	WORST CASE DISCHARGE SCENARIO36
6.2	PLANNING VOLUME CALCULATIONS37
	Table 6.1 PHMSA Percent Reduction Allowed38
6.3	WORST CASE DISCHARGE VOLUME CALCULATIONS.....40
6.4	PRODUCT CHARACTERISTICS AND HAZARDS41
	Table 6.2 Chemical and Physical Characteristics41
7.0	RESPONSE ZONE MAPS AND ASSOCIATED REFERENCE MATERIAL.....42
7.1	MAP OVERVIEW.....42
8.0	RESPONSE PLAN REVIEW AND UPDATE PROCEDURES43
8.1	FACILITY RESPONSE PLAN REVIEW GUIDELINES.....43

APPENDICES

APPENDIX A	PHMSA CROSS REFERENCE MATRIX
APPENDIX B	NOTIFICATION FORMS AND GUIDELINES
	<ul style="list-style-type: none">- PHMSA Hazardous Liquids Accident Form- State of Texas General Reporting Guidelines- Railroad Commission of Texas District Map with Contact Information- Texas Commission on Environmental Quality Region Map with Contact Information- State of Louisiana General Reporting Guidelines- Louisiana Spill Reporting Form- State of Arkansas General Reporting Guidelines- ADEM Spill Reporting Form
APPENDIX C	OSRO CONTRACTOR INFORMATION
APPENDIX D	EMERGENCY RESPONSE PERSONNEL JOB DESCRIPTIONS
APPENDIX E	RESPONSE ZONE MAPS
APPENDIX F	STANDARD INCIDENT DEBRIEFING FORM

Changes to this Plan will be documented on this page. Plan review and modifications will be initiated and coordinated by the Environmental, Health, Safety, and Security Department (EHS&S) in conjunction with the Area Supervisor/Manager of Operations.

CHANGE NUMBER	DATE OF CHANGE	DESCRIPTION OF CHANGE	PAGE NUMBER
1	October 2013	Changed RSPA to PHMSA	Cover Page, 29
2	October 2013	Included discussion on alternative response strategies and the use of area contingency plans	18
3	October 2013	Included certification that the response plan is consistent with the NCP and applicable ACPs	5
4	October 2013	Traffic control updates, training programs	Section 4, Appendix D
5	Feb. 2014	Added Primary/Alternate designations to QI	Table 1.1
6	Dec. 2013	Revised Plan Review Requirements	Section 8.1
7	Dec. 2013	Revised NRC reporting Requirements	Appendix B
8	August 2014	Updated plan to reflect ETX and LV MVPL area changes including telephone numbers of agencies and other organizations.	Entire Document
9	August 2014	Updated plan to reflect ETX and MVPL area changes.	Entire Document
10	August 2014	Removed Chad Arey and added Victor Harrington	Table 1-1, 2-1, 2-2. Page 5
11	August 2014	Removed David Mc Euen & added Clay Rodgers	Table 1-1, 2-1, 2-2. Page 5

1.0 INFORMATION SUMMARY

1.1 Purpose of Plan

The purpose of this Facility Response Plan (FRP) is to provide guidelines to quickly, safely, and effectively respond to a spill from Sunoco Pipeline L.P. pipelines located in the Longview District Response Zone. The pipelines are owned by Sunoco Partners Pipeline L.P. and operated by Sunoco Pipeline L.P.

This Plan is intended to satisfy the requirements of the Oil Pollution Act of 1990 (OPA 90), and has been prepared in accordance with the National Oil and Hazardous Substances Pollution Contingency Plan (NCP) and applicable Area Contingency Plans (ACP). Specifically, this Plan is intended to satisfy:

- Pipeline and Hazardous Materials Safety Administration (PHMSA), U.S. Department of Transportation requirements for an OPA 90 plan (49 CFR 194)

A DOT/PHMSA Cross Reference Matrix is provided in **APPENDIX A**.

1.2 Response Zone Information Summary

The information summary for the Longview District Response Zone is presented on the following pages:

TABLE 1-1 – LONGVIEW DISTRICT RESPONSE ZONE INFO. SUMMARY

Owner: Sunoco Partners Marketing and Terminals L.P. 1818 Market Street, Suite 1500 Philadelphia, PA 19103 Phone: (215) 977-3000 Fax: (215) 977-3409		Operator: Sunoco Pipeline L.P. 1820 Highway 80 West Longview, TX 75604
Product	Crude Oil	
Qualified Individuals:	Victor Harrington (Primary) Area Manager 903-291-6924 (Office) 903-475-2607 (Mobile)	
	Shannon Baker (Alternate) Operations Supervisor 903-295-0554(Office) 903-806-1593 (Mobile)	
	Clay Rodgers (Alternate) Operations Supervisor 903-291-6929 (Office) 903-235-8980 (Mobile)	
	Debbie Miller (Alternate) Technical Supervisor 903-291-6913 (Office) 903-371-9734 (Mobile)	
	Chad White (Alternate) Operations Supervisor 318-624-1776 (Office) 903-261-1417 (Mobile)	
Pipeline Description:	The Sunoco Pipeline L.P. Longview District Pipeline System transports crude oil in Texas, Arkansas, and Louisiana.	
Response Zone:	The response zone is the entire Longview District Pipeline System. The Response Zone has the potential for “significant and substantial harm” and has the potential for a “worst case discharge”	

TABLE 1-2 – DESCRIPTION OF LINE SEGMENTS/STATIONS

Line Sections	Description	Counties/Parishes	Product
	20" Longview Pump Station, (MP 0) to Block Valve, (MP 10.6)	Texas – Gregg, Harrison	Crude Oil
	20" Block Valve, (MP 10.6) to Block Valve, (MP 30.5)	Texas – Harrison	Crude Oil
	20" Block Valve, (MP 30.5) to Karnack Pump Station, (MP 37.2)	Texas – Harrison	Crude Oil
	20" Karnack Pump Station, (MP 37.2) to Block Valve, (MP 55)	Texas - Harrison Louisiana – Caddo	Crude Oil
	East Texas 10" Diboll to Douglas	Texas - Nacogdoches	Crude Oil
	East Texas 10" from Douglas to Grissom	Texas - Nacogdoches, Rusk	Crude Oil
	East Texas 10" from Grissom to Thomas	Texas - Rusk, Gregg	Crude Oil
	East Texas 10" from Thomas to MVPL	Texas - Gregg	Crude Oil
	Moncrief 8" MGL, Moncrief to Thomas	Texas - Gregg	Crude Oil
	King 8" MGL, King Station to Kilgore Junction	Texas - Gregg	Crude Oil
	Kilgore Jct. and Moncrief Station 8"	Texas - Gregg	Crude Oil
	City of White Oak 4", 6" and 8" gathering lines	Texas - Gregg	Crude Oil
	City of Longview #4-6"-B, #4C-4"-C, #4D-4"-D gathering lines	Texas - Gregg	Crude Oil
	City of Gladewater #55-4"-A gathering line	Texas - Gregg	Crude Oil
	City of Kilgore #28-4"-A, B and C gathering line	Texas - Gregg	Crude Oil
	City of Price #36-4"-A and #36-3"-B gathering line	Texas - Rusk	Crude Oil
	City of Clarksville 4" gathering line	Texas - Gregg	Crude Oil
	Sabine River to Grissom #21-6"-D and #21-6"-E gathering	Texas - Rusk, Gregg	Crude Oil
	New London to Grissom #21-6"-D and #21-6"-E gathering Lines	Texas - Rusk	Crude Oil
	Gathering line #59-6"-A	Texas - Gregg	Crude Oil
	Gathering line #8A to Thomas	Texas - Gregg	Crude Oil

	King Ranch to Thomas Station 30-6"-C	Texas - Gregg	Crude Oil
	Gathering line 8" MGL Station 8A to Thomas	Texas - Gregg	Crude Oil
	Wortham to Longview 20"	Texas - Anderson, Gregg, Henderson, Smith, Upshur	Crude Oil
	Galena Park East Houston 12"	Texas - Nacogdoches, Rusk, Gregg, Houston, Henderson, Smith, Upshur,	Crude Oil
	Kilgore to Houston 10" (Kilgore to Goodrich idle)	Texas - Nacogdoches, Rusk, Gregg	Crude Oil
	Millenium 12" Spindletop to Mid Valley	Texas - Nacogdoches, Rusk, Gregg	Crude Oil
	Millenium Sour Lake-Port Arthur (idle)	Texas - Nacogdoches, Rusk, Gregg, Henderson, Smith, Upshur,	Crude Oil
	Hebert to Waskom 8"	Texas - Shelby, Panola, Harrison	Diesel, Gasoline, Jet A
	20" Block Valve, (MP 55) to Block Valve, (MP 63)	Louisiana – Caddo	Crude Oil
	20" Block Valve, (MP 63) Benton Pump Station, (MP 63.8)	Louisiana – Caddo, Bossier	Crude Oil
	20" Benton Pump Station, (MP 63.8) Block Valve, (MP 84)	Louisiana – Bossier	Crude Oil
	20" Block Valve, (MP 84) Cotton Valley Pump Station, (MP 86)	Louisiana – Bossier, Webster	Crude Oil
	20" Cotton Valley Pump Station, (MP 86.2) Haynesville Pump Station, (MP 103.6)	Louisiana – Webster, Claiborne	Crude Oil
	8" Bigheart (MP 0) to Haynesville Station (MP 2.1)	Louisiana – Claiborne	Crude Oil
	8" Haynesville Pump Station (MP 0) to Magnolia Station (MP 20)	Louisiana – Claiborne Arkansas - Columbia	Crude Oil
	20" Haynesville Pump Station, (MP 103.6) to Block Valves (2) (MP 117.5)	Louisiana – Claiborne	Crude Oil
	20" Block Valve (MP 117.5) to Spearsville Pump Station (MP 138.4)	Louisiana – Claiborne, Union	Crude Oil
	20" Spearsville Pump Station (MP 138.4) to Block Valve (MP 163)	Louisiana – Union	Crude Oil

Line Sections Cont.	Description	County	Product
	20" Block Valve (MP 163) to Stevenson Pump Station, (MP 173.0)	Louisiana – Union, Morehouse	Crude Oil
	20" Stevenson Pump Station, (MP 173.0) to Block Valve (MP 200)	Louisiana – Morehouse,	Crude Oil
	20" Block Valve, (MP 200) to Oak Grove Station, (MP 202.8)	Louisiana –Morehouse, West Carroll	Crude Oil
	20" Oak Grove Station, (MP 202.8) to Block Valve, (MP 224)	Louisiana – West Carroll, East Carroll	Crude Oil
	20" Block Valve, (MP 224) to Mayersville Pump Station (MP 227)	Louisiana – East Carroll	Crude Oil
	12" Delhi Pump Station, (MP 0) to Block Valve (MP 7.2)	Louisiana – Richland	Crude Oil
	12" Block Valve (MP 7.2) to Block Valve (MP 7.7)	Louisiana –Richland	Crude Oil
	12" Block Valve (MP 7.7) to River trap (MP 44)	Louisiana –Richland, East Carroll	Crude Oil
	20" #2 Crossing West Bank to Mayersville Pump Station, (MP 227)	Louisiana – East Carroll	Crude Oil
Stations	Longview Pump Station	Texas - Gregg	Crude Oil
	Karnack Pump Station	Texas - Harrison	Crude Oil
	Center Station	Texas - Shelby	Diesel, Gasoline, Jet A
	Douglas ET Station	Texas - Nacogdoches	Crude Oil
	Douglas Kilgore Station	Texas - Nacogdoches	Crude Oil
	Douglas Mill Station	Texas - Nacogdoches	Crude Oil
	Grisson Station	Texas - Rusk	Crude Oil
	Kilgore Station	Texas - Gregg	Crude Oil
	LaGloria Station	Texas - Gregg	Crude Oil
	London Station	Texas - Rusk	Crude Oil
	Reiber Station	Texas - Rusk	Crude Oil
	Texoma Station	Texas - Gregg	Crude Oil
	Thomas Station	Texas - Gregg	Crude Oil
	Benton Pump Station	Louisiana - Bossier	Crude Oil
	Cotton Valley Pump Station	Louisiana - Webster	Crude Oil

	Haynesville Pump Station	Louisiana - Claiborne	Crude Oil
	Spearsville Pump Station	Louisiana - Union	Crude Oil
	Stevenson Pump Station	Louisiana - Morehouse	Crude Oil
	Oak Grove Pump Station	Louisiana – West Carroll	Crude Oil
	Delhi Pump Station	Louisiana - Richland	Crude Oil


Alignment Maps Location(s): (Piping, Plan Profiles)	Maintained in the company's DSS mapping program
Spill Detection and Mitigation Procedures:	Refer to SECTION 3
Worst Case Discharge:	20" Longview to Mayersville - Location: 24.6 miles from Spearsville Station to Block Valve (MP 163) 51,000 bbls (2,142,000 gallons)
Statement of Significant and Substantial Harm:	<p>Basis for Operator's Determination of Significant and Substantial Harm</p> <ul style="list-style-type: none"> • At least one pipeline in the Response Zone is greater than 6 5/8 inches and most pipelines are longer than 10 miles • At least one section of pipeline crosses a river, meeting the requirement for location within one-mile of an environmentally sensitive area • Therefore, the potential to cause significant and substantial harm is present within the entire Response Zone
Date Plan Prepared:	July 2013

The information contained in this Plan is intended to be used as guidelines for the spill responder. Actual circumstances will vary and will dictate the procedures to be followed, some of which may not be included in this manual.

1.3 Operator Certification

In accordance with section 311 (j) (5) (F) of the Federal Water Pollution Control Act, as amended by Section 4202 of the Oil Pollution Act of 1990, I do hereby certify to the Pipeline and Hazardous Materials Safety Administration of the Department of Transportation that Sunoco Pipeline, L.P. has obtained, through contract or other approved means, the necessary private personnel and equipment to respond, to the maximum extent practicable, to a worst case discharge or a substantial threat of such a discharge.

Furthermore, Sunoco Pipeline, L.P. has reviewed the National Contingency Plan (NCP) and each applicable Area Contingency Plan (ACP) and this response plan is consistent with the NCP and applicable ACPs.



VICTOR HARRINGTON
AREA MANAGER
LONGVIEW DISTRICT
SUNOCO PIPELINE L.P.

8-19-14

DATE

2.0 NOTIFICATION PROCEDURES

2.1 Notification Overview

The station/operations personnel responsible for initiating and coordinating a response shall be responsible to ensure that all agency notifications are performed. Depending on the specifics of the situation, there may exist a requirement to perform agency notifications, internal notifications, drug and alcohol testing, Operator Qualification (OQ) suspension of task qualification and written follow-up. In situations where the reporting requirements are not clear or delegation of duties is necessary, HES or DOT Compliance for jurisdictional pipelines should be consulted for guidance.

In general, the notification sequence for a release is as follows:

- Station/Operations personnel will identify and control the source of the release (if safe to do so) and will notify the Qualified Individual and Operations Control Center.
- The Qualified Individual will assume the role of Incident Commander (Qualified Individual) and will conduct notifications in general accordance with the State of Texas, Louisiana, or Arkansas Notification Guidelines. These guidelines, along with additional notification forms/procedures are presented in **APPENDIX B** of this plan.

2.2 Information Required for Notifications

The following information should be available and provided when making initial and follow-up notifications:

Name of pipeline:

Time of discharge:

Location of discharge:

Name of oil involved:

Reason for discharge (e.g., material failure, excavation damage, corrosion):

Estimated volume of oil discharged:

Weather conditions on scene:

Actions taken or planned by persons on scene:

The following tables contain contact information for the facility response team, emergency response personnel, regulatory agencies, and local service providers:

TABLE 2-1 – FACILITY RESPONSE TEAM CONTACT INFORMATION

FACILITY RESPONSE TEAM		
Name/Title	Contact Information	Response Time
Victor Harrington Area Manager Qualified Individual	903-291-6924 (Office) 903-475-2607 (Mobile)	Varies depending on location of release
Shannon Baker Operations Supervisor Qualified Individual	903- 295-3374 (Office) 903-738-3793 (Mobile)	Varies depending on location of release
Clay Rodgers Operations Supervisor Qualified Individual	903-291-6929 (Office) 903-235-8980 (Mobile)	Varies depending on location of release
Debbie Miller Operations Supervisor Qualified Individual	903-291-6913 (Office) 903-371-9734 (Mobile)	Varies depending on location of release
Chad White Operations Supervisor Qualified Individual	903-261-1417 (Mobile) 318-624-1776 (Office)	Varies depending on location of release

TABLE 2-2 – ERP CONTACT INFORMATION

EMERGENCY RESPONSE PERSONNEL CONTACT INFORMATION			
Name/Title	Contact Information	Response Time	Responsibilities During Response Action
Victor Harrington Area Manager Qualified Individual	903-291-6924 (Office) 903-475-2607 (Mobile)	Varies	Incident Commander/ Operations
Clay Rodgers Operations Supervisor Qualified Individual	903-291-6929 (Office) 903-235-8980 (Mobile)	Varies	Operations
Shannon Baker Operations Supervisor Qualified Individual	903-295-3374 (Office) 903-738-3793 (Mobile)	Varies	Planning
Debbie Miller Operations Supervisor Qualified Individual	903-291-6913 (Office) 903-371-9734 (Mobile)	Varies	Logistics
Chad White Operations Supervisor Qualified Individual	903-261-1417 (Mobile) 318-624-1776 (Office)	Varies	Operations
Allyn Robertson Health and Safety Specialist	903-291-6925 (Office) 281-520-2179 (Mobile)	Varies	Safety
Russell Howerton Emergency Response Coordinator	409-659-8430 (Mobile)	Varies	Regulatory Liaison
David Born DOT Compliance Coordinator	(281) 637-6497 (Office) (713) 702-2091 (Mobile)	Varies	DOT Liaison
Judy Noble Operations Assistant	(903) 295-0546 (Office) (903) 399-1605 (Mobile)	Varies	Finance

TABLE 2-3 – REGULATORY AGENCY CONTACT INFORMATION

REGULATORY AGENCY CONTACT INFORMATION		
Agency	Phone Number	Reporting Requirements
Federal Agencies		
National Response Center (NRC) <i>NRC will contact all other federal agencies including USDOT/PHMSA and EPA</i>	(800)424-8802 or (202) 267-2675	Any spill on water. Telephonic notification is required within 2 hours following the discovery of a release that resulted in any discharge to water
U.S. Department of Transportation/Pipeline Hazardous Materials Safety Administration (PHMSA)	(800) 424-8802 or (202) 267-2675	<p><u>Telephonic Notification</u> At the earliest practicable moment following discovery of a release of the hazardous liquid resulting in an event described above, the operator shall give notice of any failure that:</p> <ul style="list-style-type: none"> • Caused a death or a personal injury requiring hospitalization • Resulted in either a fire or explosion not intentionally set by the operator • Caused estimated property damage, including cost of clean up and recovery, value of lost product, and damage to the property of the operator or others, or both, exceeding \$50,000 • Resulted in pollution of any stream, river, lake, reservoir, or other similar body of water that violated applicable water quality standards, caused a discoloration of the surface of the water or adjoining shoreline, or deposited a sludge or emulsion beneath the surface of the water or upon adjoining shorelines or • In the judgment of the operator was significant even though it did not meet the criteria of any of the above. <p><u>Written Reporting</u> A 7000-1 report is required within 30 days after discovery of the accident for each failure in a pipeline system regulated by DOT 195 in which there is a release of the hazardous liquid transported resulting in any of the following:</p>

U.S. Department of Transportation/Pipeline Hazardous Materials Safety Administration (PHMSA) Continued...		<ul style="list-style-type: none"> • Explosion or fire not intentionally set by the operator • Release of 5 gallons or more of hazardous liquid except that no report is required for a release of less than 5 barrels resulting from a pipeline maintenance activity if the release is: <ul style="list-style-type: none"> • Not otherwise reportable under this section • Not on water • Confined to company property or pipeline right-of-way and • Cleaned up promptly • Death of any person • Personal injury necessitating hospitalization • Estimated property damage, including cost of clean-up and recovery, value of lost product, and damage to the property of the operator or others, or both, exceeding \$50,000. • A supplemental report shall be filed within 30 days of receiving any changes in the information reported or additions to the original DOT 7000-1 report.
State Agencies		
Texas		
Texas Railroad Commission HQ & District (Austin, TX) District No. 3, Houston District No. 5 & 6, Kilgore District No. 7B, Abilene District No. 7C, San Angelo District No. 8 & 8A, Midland District No. 9, Wichita Falls	(800) 832-8224 (512) 463-6788 (713) 869-5001 (903) 984-3026 (325) 677-3545 (325) 657-7450 (432) 684-5581 (940) 723-2153	Any oil spill of 5 barrels or more on land or any amount on water. Report any discharge originating in state waters immediately. SEE DISTRICT MAP IN APPENDIX B
Texas Commission on Environmental Quality (TCEQ) OR TCEQ Regional Office (SEE REGIONAL MAP IN APPENDIX B)	(800)832-8224	Any spill greater than 25 gallons of refined product (gasoline, diesel, etc.) on land or any amount on water.

State Agencies Continued		
Texas Department of Highways and Public Transportation	(800) 832-8224	Any oil spill on interstate or F.M. highways or roads.
Texas Department of Health		Any oil spill that threatens public or environmental health.
Texas Department of Parks & Wildlife		Any oil spill that threatens fish or wildlife.
Texas General Land Office	(800) 832-8224	Any oil spill that threatens waters of the Texas Gulf Coast. Report any discharge with the potential to impact state waters and/or any discharge originating in state waters. The TGLO must be notified of any actual or threatened discharge within one hour of the time the discharge is discovered.
Texas Department of Public Safety		Any oil spill of 5 barrels or more on land or water; any oil spill on interstate, U.S., State or F.M. highways or roads.
Texas Railroad Commission Office of Pipeline Safety (Agent for Federal DOT)	(512) 463-6788	Any spill or accident on an intrastate pipeline regulated by the Texas Railroad Commission requiring telephonic notification to the US DOT (pg. 32) also requires telephonic notification to the Texas Railroad Commission Office of Pipeline Safety within two hours of discovering the incident
Texas Railroad Commission Landowner Registration	(512) 463-7062	If a landowner is registered with the commission, the owner operator is required to provide copies of all RRC required leak reports to the landowner. Operations shall determine if a landowner is registered.
Louisiana		
Louisiana Department of Public Safety	(225) 925-6595	Report <u>within 1 hour</u> any spill that may result in emergency conditions
Louisiana Department of Environmental Quality – Office of Environmental Compliance	(225) 219-3640 (225) 342-1234 (24h)	Report <u>within 24 hours</u> any spills that do not result in emergency conditions
Louisiana Oil Spill Coordinators Office	(225) 925-6606	Report <u>within 24 hours</u> any spills that do not result in emergency conditions

State Agencies Continued		
Louisiana Department of Natural Resources – Office of Conservation	(225) 342-5540 (225) 342-5505 (225) 342-3705 (fax)	Report at the earliest practical moment follow discovery of an pipeline failures that result in: <ol style="list-style-type: none"> 1. An explosion or fire 2. A release of 5 bbls or more 3. A release of less than 5 bbls only if the release left company property 4. Death of any person 5. Bodily harm to any person 6. Property Damage of more than \$50,000 7. Pollution to any body of water that violates applicable water quality standards.
Arkansas		
Arkansas Department of Environmental Quality	(501) 682-0833 or (800) 322-4012 (24h)	Immediately report all spills to waters of the State
Arkansas Department of Emergency Management	(501) 683-6705 (24hr) (800) 322-4012	
Arkansas Oil and Gas Commission	(870) 862-4965 (870) 862-8823 (fax)	Immediately report any leak from tanks or pipelines from which oil or gas is escaping or has escaped. Note: Report for oil losses are N/A unless the loss exceeds 25 bbls in the aggregate

TABLE 2-4 – EMERGENCY SERVICES CONTACT INFORMATION

EMERGENCY SERVICES BY COUNTY/PARISH	
Organization	Phone Number
Texas	
Gregg County, TX Sheriff LEPC	(903) 236-8400 (903) 234-3144
Harrison County, TX Sheriff LEPC	(903) 923-4000 (903) 935-4870
Henderson County, TX Sheriff LEPC	(903) 670-1479 (903) 677-7242
Panola County, TX Sheriff LEPC	(903) 693-0333 (903) 693-0360
Nacogdoches County, TX Sheriff LEPC	(936) 560-7777 (936) 560-7755
Rusk County, TX Sheriff LEPC	(903) 657-3582 (903) 657-0326
Shelby County, TX Sheriff LEPC	(936) 598-5600 (936) 598-5601
Smith County, TX Sheriff LEPC	(903) 590-2600 (903) 590-2655
Upshur County, TX Sheriff LEPC	(903) 843-2368 (903) 843-4003
Louisiana	
Caddo Parish, LA Sheriff LEPC	(318) 675-2170 (318) 425-5351
Bossier Parish, LA Sheriff LEPC	(318) 965-2203 (318) 425-5351
Webster Parish, LA Sheriff LEPC	(318) 377-7133 (318) 377-7133
Clairborne Parish, LA Sheriff LEPC	(318) 927-2011 (318) 927-2011
Union Parish, LA Sheriff LEPC	(318) 368-3124 (318) 368-3124
Morehouse Parish, LA Sheriff LEPC	(318) 281-4141 (318) 281-4141

West Carroll Parish, LA Sheriff LEPC	(318) 428-2331 (318) 428-2331
East Carroll Parish, LA Sheriff LEPC	(318) 559-2800 (318) 559-2800
Richland Parish, LA Sheriff LEPC	(318) 728-2071 (318) 728-2071
Arkansas	
Columbia County, AR Sheriff LEPC	(870) 235-3740 (870) 235-3740

TABLE 2-5 - CONTRACTOR CONTACT INFORMATION

CONTRACTOR INFORMATION	
Organization	Phone Number
USCG Classified OSRO's	
OMI Environmental Solutions	(800) 645-6671 (903) 232-7151
Progressive Environmental Service (Eagle/SWS)	(877) 742-4215 (903) 984-0001
National Response Corporation	(800) 899-4672
Excavation Services	
B&N Contractors Haynesville, LA	(318) 624-0780
C&S Lease Services LC Kilgore, TX 75662-4937	(903) 984-4148 (24hr)
Palmetto Services, LLC Henderson, TX	(936) 591 5148
Vacuum Truck Services	
C&S Lease Services LC Kilgore, TX 75662-4937	(903) 984-4148 (24hr)
Wildlife Rehabilitation	
Wildlife Center of Texas Sharon Schmaltz	(713) 861-9453 (Office) (281) 731-8826 (Mobile) (713) 279-1417 (Pager)
Tri-State Bird Rescue Research Center, Newark, DE	(302) 737-7241 (800) 710-0695 (Pager)

3.0 SPILL DETECTION AND ON-SCENE SPILL MITIGATION PROCEDURES

3.1 Spill Detection

Detection of a discharge from a pipeline system may occur in a number of ways including:

- Detection by the pipeline Control Center Supervisor (CCS)
- Visual detection by Company field personnel or pipeline patrols
- Visual detection by the public

The pipeline systems are controlled and monitored by a SCADA system located in Sugarland, Texas and/or Montello, PA. This system provides the Control Center Supervisors access to pertinent information regarding oil movements, pressures and equipment status and control.

Automated Detection

The pipelines are equipped with pressure and flow monitors, which exercise local control and transmit data to the control center. These systems are set to alarm or shut down on preset deviations of pressure flow. In case of an alarm, control center personnel will take the appropriate actions in accordance with standard operating procedures. A summary of the operating procedures is provided below.

Trained personnel in the control center will monitor the SCADA system for the following parameters:

- Flow rates
- Pressure
- Valve positions

AVAILABILITY - ALL LINES

Operating Procedures for the Automated System

- **SCADA System 10-Second Data Access**
The control center personnel monitor and control pipeline operations with the SCADA system in the Pipeline Control Center. The ultimate decision on leak detection lies with the Pipeline Control Center.

AVAILABILITY - ALL LINES

- **Communication Flexibility/Redundancy**

The Company's SCADA system acquires data via a satellite network. Satellite communications allow large volumes of data to be transmitted both to and from all field locations very rapidly. Network configuration and transmission protocols provide the flexibility to establish guaranteed delivery transmissions as required. Communication system redundancy provides accurate and reliable data to pipeline operators.

AVAILABILITY - ALL LINES

- **Parameter Alarms**

A parameter alarm is a data value limit (high or low) which can be set by the Pipeline Control operator to alert upset conditions regardless of whether the Operator is actively monitoring the data point in question. Operators are required to establish parameter alarm settings on mainline pressures and flow rates for all operating line segments. In combination with ten-second data acquisition rates, parameter alarms provide near instantaneous notification of potential upset conditions on all operation mainlines.

AVAILABILITY - ALL LINES

- **Trending**

The SCADA system includes a trending facility which graphically displays pressures, temperature, and flow rate data for each mainline pump and oil receiving location on the system. This system can provide valuable insight into operations history and can help the operator proactively address potential upset conditions.

AVAILABILITY - ALL LINES

- **Tank Gauging with Parameter Alarms**

Tank gauge data is available to Pipeline Control for use by pipeline operators. Company systems are gauged automatically by the SCADA computer and the data is made available to the operator on demand. Parameter alarms (see above) are also available for tank levels, to ensure no potential tank discharge.

AVAILABILITY - ALL LINES

- **Training**

All operators are compliant with DOT 195 Operator Qualification Requirements.

Visual Detection by Company Personnel

Aerial patrol flights will be made 26 times a year not to exceed 21 days apart. If unable to fly, area personnel will walk or drive the right-of-way. The intent of the patrol is to observe the area directly over the pipeline right-of-way for leaks, exposed pipes, washes, missing markers, and other unusual conditions. Construction on either side of the pipeline right-of-way is also monitored. Discharges to the land or surface waters may also be detected by Company personnel during regular operations and inspections. Should a leak be detected, the appropriate actions are taken including but not limited to:

- Notifications as per **SECTION 2**
- A preliminary assessment of the incident area
- **If appropriate, initiate initial response actions per SECTION 4**

TABLE 4-1 provides a checklist for initial response actions.

Visual Detection by the Public

Right-of-way marker signs are installed and maintained at road crossing and other noticeable points and provide an Operations Control 24-hour number for reporting emergency situations. The Company also participates in the “call before you dig” or “One Call” utility notification services which can be contacted to report a leak and determine the owner/operator of the pipeline. If the notification is made to a local office or pump station, the Company representative receiving the call will generally implement the following actions:

- Notify the Pipeline Control and region/designated office
- Dispatch Company field personnel to the site to confirm discharge and conduct preliminary assessment
- Notify their immediate area supervisor and provide assessment results
- Follow the Procedure for Investigating Incoming Call Reports of Potential Pipeline Releases

Pipeline Shutdown

If any of these situations are outside the expected values, abnormal conditions are considered to exist. If abnormal conditions exist, Pipeline Control will take the appropriate actions to ensure that a release does not occur. If a discharge has occurred, Pipeline Control will take actions to limit the magnitude. In either case, appropriate actions taken by Company personnel could include, but are not limited to:

- Shut down affected line segment if there is an indication of a leak
- Isolate line segment
- Depressurize line
- Start internal and external notifications
- Mobilize additional personnel as required

3.2 Spill Mitigation Procedures

Each spill mitigation situation is unique and must be treated according to the circumstance present. In every situation, however, **personnel safety must be assessed as the first priority**. The potential for ignition and/or toxic exposure must be promptly evaluated. If the use of alternative response strategies are identified for use such as in-situ burning or dispersants as identified in the USEPA Region VI Area Contingency Plan, Sunoco Pipeline, L.P. will seek approval from the respective Regional Response Team in conjunction with the USEPA, Texas RRC, Texas GLO, TCEQ, LDEQ, ADEQ and/or the USCG as appropriate. An example of spill mitigation procedures are listed below:

TABLE 3-1 – SPILL MITIGATION PROCEDURES

TYPE	MITIGATION PROCEDURE
Failure of Transfer Equipment	<ol style="list-style-type: none">1. Personnel safety is the first priority. Evacuate nonessential personnel or personnel at high risk.2. Terminate transfer operations and close block valves.3. Drain product into containment areas if possible.4. Eliminate sources of vapor cloud ignition by shutting down all engines and motors.
Tank Overfill/Failure	<ol style="list-style-type: none">1. Personnel safety is the first priority. Evacuate nonessential personnel or personnel at high risk.2. Shut down or divert source of incoming flow to tank.3. Transfer fluid to another tank with adequate storage capacity (if possible).4. Shut down source of vapor cloud ignition by shutting down all engines and motors.5. Ensure that dike discharge valves are closed.6. Monitor diked containment area for leaks and potential capacity limitations.7. Begin transferring spilled product to another tank as soon as possible
Piping Rupture/Leak (under pressure and no pressure)	<ol style="list-style-type: none">1. Personnel safety is the first priority. Evacuate nonessential personnel or personnel at high risk.2. Shut down pumps. Close the closest block valves on each side of the rupture.3. Drain the line back into contained areas (if possible). Alert nearby personnel of potential safety hazards.4. Shut down source of vapor cloud ignition by shutting down all engines and motors.5. If piping is leaking and under pressure, then relieve pressure by draining into a containment area or back to a tank (if possible). Then repair line according to established procedures.

TYPE	MITIGATION PROCEDURE
Fire/Explosion	<ol style="list-style-type: none"> 1. Personnel safety is the first priority. Evacuate nonessential personnel or personnel at risk of injury. 2. Notify local fire and police departments. 3. Attempt to extinguish fire if it is in incipient (early) stage and if it can be done safely. 4. Shut down transfer or pumping operation. Attempt to divert or stop flow of product to the hazardous area (if it can be done safely). 5. Eliminate sources of vapor cloud ignition shutting down all engines and motors. 6. Control fire before taking steps to contain spill.
Manifold Failure	<ol style="list-style-type: none"> 1. Personnel safety is the first priority. Evacuate nonessential personnel or personnel at high risk. 2. Terminate transfer operations immediately. 3. Isolate the damaged area by closing block valves on both sides of the leak/rupture. 4. Shut down source of vapor cloud ignition by shutting down all engines and motors. 5. Drain fluids back into containment areas (if possible).

3.3 Response Equipment

Emergency equipment is available to allow personnel to respond safely and quickly to emergency situations. Fire extinguishers are located throughout the facility and meet National Fire Prevention Association (NFPA) and OSHA standards. All other response equipment will be supplied by the OSROs listed in **TABLE 2-5**. This equipment is maintained regularly and inspected on a monthly basis. OSRO resources and response times are verified periodically.

Response equipment is mobilized and deployed by the Maintenance Station Foreman or District Supervisor or their designee. The order of equipment mobilization should be as follows:

1. Closest Local OSRO
2. Second Closest OSRO
3. National OSRO

Sunoco Pipeline requires an annual certification from each OSRO to assure compliance with the National Preparedness for Response Exercise program (PREP) guidelines.

Each listed OSRO has their own response equipment, a minimum of 1,000 feet of containment boom, absorbents, boats, and vacuum trucks. Lists of the OSRO's equipment resources may be found in their services contract. OSRO response equipment is inspected and refurbished after every use which is typically more than once a week. The primary OSRO's equipment is checked monthly or at a minimum of once every two months. Sunoco Pipeline has ensured by contract the availability of personnel and equipment necessary to respond, to the maximum extent practicable, to a worst case discharge or a substantial threat of such discharge in this response zone.

An equipment list and list of trained personnel necessary to continue operation of the equipment and staff the oil spill removal organization for the first 7 days of a response for each of the OSRO contractors listed in **TABLE 2-5** is provided in **APPENDIX C**.

4.0 RESPONSE ACTIVITIES

Sunoco Logistics personnel will work in unison, following Incident Command protocols, to cooperate with and assist Fire, Police and other first responders with halting or redirecting traffic on roads and railroads in the affected area as appropriate.

In the event of a failure of a pipeline, the SXL H&S department will employ instrumentation (appropriate for the product contained in the pipeline at the time of failure) to access and determine the extent and coverage of a potential vapor cloud if present.

The instrumentation used in the determination will have the following capabilities:

Petroleum Products

- Combustible gas meter with 0-100% read out. Alarm calibrated to sound at 10% of LEL.
- Ability to quantify the following gases: O₂, H₂S, and CO.

LPG

- Photoionization Detector with the capabilities of detecting and quantifying ethane in air.

Note: All instrumentation regardless of product should be intrinsically safe.

4.1 Spill Response Actions.

In the event of a spill, actions will be taken to protect personnel and public safety as well as the environment. The checklist provided below is an example of some of the activities conducted during a spill. Table 4-1 is an example of a Spill Response Checklist.

TABLE 4-1 – SPILL RESPONSE ACTION CHECKLIST

RESPONSE ACTION	PERSONNEL TAKING ACTION	DATE/TIME ACTION TAKEN
DOCUMENT ALL ACTIONS TAKEN		
First Person to Discover Spill		
Immediately notify Qualified Individual and Operations Control Center or posted emergency contacts. Take appropriate action to protect life and ensure safety of personnel.		
Immediately shut down terminal operations (if applicable). Remotely controlled motor operated valves will be closed by the Operations Center as soon as a leak is detected.		
Secure the scene. Isolate the area and assure the safety of people and the environment. Keep people away from the scene and outside the safety perimeter.		
Advise personnel in the area of any potential threat and/or initiate evacuation procedures.		
Qualified Individual		
Assume role of Incident Commander until relieved.		
Conduct preliminary assessment of health and safety hazards.		
Request medical assistance if an injury has occurred.		
Evacuate nonessential personnel, notify emergency response agencies to provide security, and evacuate surrounding area (if necessary).		
Make appropriate regulatory notifications. <ul style="list-style-type: none"> • National Response Center • Appropriate State Agency (See List of Federal, State, & Local agencies along with notification procedures in TABLES 2-3 and 2-4)		
Call out spill response contractors (See List in TABLE 2-5)		
Atmospheric conditions in the release area should be monitored using a four gas meter – ensuring oxygen, H ₂ S, carbon dioxide and lower explosive limit (LEL) are all at safe levels. Atmospheric monitoring should continue throughout the response activities. These activities should be consistent with SXL's Health & Safety policy specifically HS-G-027.		

RESPONSE ACTION	PERSONNEL TAKING ACTION	DATE/TIME ACTION TAKEN
Qualified Individual (Continued)		
If safe to do so, direct facility responders to shut down and control the source of the spill. Be aware of potential hazards associated with product and ensure that flammable vapor concentrations are within safe atmosphere before sending personnel into the spill area.		
If safe to do so, direct facility responders to shut down potential ignition sources in the vicinity of the spill, including motors, electrical pumps, electrical power, etc. Keep drivers away from truck rack if spill occurs there.		
If safe to do so, direct facility responders to stabilize and contain the situation. This may include berming or deployment of containment and/or sorbent boom.		
For low flash oil (<100°F), consider applying foam over the oil, using water spray to reduce vapors, grounding all equipment handling the oil, and using non-sparking tools.		
If there is a potential to impact shorelines, consider lining shoreline with sorbent or diversion boom to reduce impact.		
Notify Local Emergency Responders. Obtain the information necessary to complete the Accident Report - Hazardous Liquid Pipeline Systems (APPENDIX B) and phone this information to the HES Manager.		
On-Scene Coordinator		
Activate all or a portion of ERP (as necessary). Liaison Officer will maintain contact with notified regulatory agencies.		
Ensure the ERP has mobilized spill response contractors (if necessary). It is much better to demobilize equipment and personnel if not needed than to delay contacting them if they are needed.		
Document all response actions taken, including notifications, agency/media meetings, equipment and personnel mobilization and deployment, and area impacted.		
Water Based Spills: Initiate spill tracking and surveillance operations utilizing information in SECTION 4.2 . Determine extent of pollution via surveillance aircraft or vehicle. Estimate volume of spill utilizing information in SECTION 4.3 . Send photographer /videographer if safe.		
Land Based Spills: Initiate spill tracking and surveillance if applicable.		
SECONDARY RESPONSE ACTIONS (Refer to ERP job descriptions in APPENDIX D)		

4.2 Spill Tracking and Surveillance

The following guidelines should be utilized when tracking a spill and/or conducting spill surveillance:

- Surveillance of an oil spill should begin as soon as possible following discovery to enable response personnel to assess spill size, movement, and potential impact locations;
- Dispatch observers to crossings downstream or down gradient to determine the spill's maximum reach;
- Clouds, shadows, sediment, floating organic matter, submerged sand banks or wind-induced patterns on the water may resemble an oil slick if viewed from a distance;
- Sorbent pads may be used to detect oil or water;
- Use surface vessels to confirm the presence of any suspected oil slicks (if safe to do so); consider directing the vessels and photographing the vessels from the air, the latter to show their position and size relative to the slick;
- It is difficult to adequately observe oil on the water surface from a boat, dock, or shoreline;
- Spill surveillance is best accomplished through the use of helicopters or small planes; helicopters are preferred due to their superior visibility and maneuverability;
- If fixed-wing planes are to be used, high-wing types provide better visibility than low-wing types;
- All observations should be documented in writing and with photographs and/or videotapes;
- Describe the approximate dimensions of the oil slick based on available reference points (i.e. vessel, shoreline features, facilities); use the aircraft or vessel to traverse the length and width of the slick while timing each pass; calculate the approximate size and area of the slick by multiplying speed and time;
- Record aerial observations on detailed maps, such as topographic maps
- In the event of reduced visibility, such as dense fog or cloud cover, boats may have to be used to patrol the area and document the location and movements of the spill; however, this method may not be safe if the spill involves a highly flammable product;
- Surveillance is also required during spill response operations to gauge the effectiveness of response operations; to assist in locating skimmers; and to assess the spill's size, movement, and impact.

An example of a spill surveillance checklist is presented on **TABLE 4-2**.

TABLE 4-2 – SPILL SURVEILLANCE CHECKLIST

SPILL SURVEILLANCE CHECKLIST	
General Information	
Date:	Tidal or river stage (flood, ebb, slack, low water):
Time:	On-Scene Weather Conditions:
Incident Name:	Platform (helicopter, fixed-wing aircraft, boat, shore):
Observers Name:	Flight path/trackline:
Observers' Affiliation:	Altitude where observation taken:
Location of Source:	Areas not observed (i.e. foggy locations, restricted air spaces, shallow water areas):
Oil Observations	
Slick location(s):	Color and appearance (i.e. rainbow, dull or silver sheen, black or brown in color or mousse):
Slick dimensions:	Percent coverage:
Orientation of slick(s):	Is oil recoverable (Y/N)?:
Distribution of oil (i.e. windrows, streamers, pancakes or patches):	
Considerations	
<ul style="list-style-type: none"> • During surveillance, go beyond known impacted areas to check for additional oil spill sites • Include the name and phone number of the person making the observations • Clearly describe the locations where oil is observed and the areas where no oil has been seen 	
Other Observations	

SPILL SURVEILLANCE CHECKLIST	
Response Operations	
Equipment deployment locations:	
Boom deployment locations:	
Environmental Operations	
Locations of convergence lines, terrain, and sediment plumes:	
Locations of debris and other features that could be mistaken for oil:	
Wildlife present in area (locations and approximate numbers):	
Spill Sketch (Use Additional Pages if Needed)	

4.3 Estimating Spill Volumes

Early in a spill response, estimation of spill volume is required in order to:

- Report to agencies
- Determine liquid recovery requirements
- Determine personnel and equipment requirements
- Estimate disposal and interim storage requirements

Some rapid methods to estimate spill size are:

- Transfer operations: Multiply the pumping rate by the elapsed time that the leak was in progress, plus the drainage volume of the line between the two closest valves or isolation points (volume loss = pump rate [bbls/min] x elapsed time [min] + line contents [bbl])
- Tank overfills: Elapsed time multiplied by the pumping rate
- Visual assessment of the surface area and thickness (**TABLE 4-3**); **this method may yield unreliable results because:**
 - Interpretation of sheen color varies with different observers
 - Appearance of a slick varies depending upon amount of available sunlight, sea-state, and viewing angle
 - Different products may behave differently, depending upon their properties

TABLE 4-3 - OIL THICKNESS ESTIMATION CHART

OIL THICKNESS ESTIMATIONS				
STANDARD FORM	Approx. Film Thickness		Approx. Quantity of Oil in Film	
	Inches	Millimeters	gallons/mile ²	liters/km ²
Barely Visible	0.0000015	0.00004	25	44
Silvery	0.000003	0.00008	50	88
Slightly Colored	0.000006	0.00015	100	179
Brightly Colored	0.000012	0.0003	200	351
Dull	0.00004	0.001	666	1,167
Dark	0.00008	0.002	1,332	2,237
Thickness of light oils: 0.0010 inches to 0.00010 inches				
Thickness of heavy oils: 0.10 inches to 0.010 inches				

4.4 Emergency Response Personnel

The Emergency Response Personnel (ERP) has been created and organized to plan for and manage emergencies. The ERP is composed of Company personnel from offices within the Area. Additional personnel from outlying offices can be used (if needed). The ERP will develop strategies and priorities for a response, then will supervise contractors, handle safety and security matters, and will provide logistical support for contractor personnel. The ERP will handle all communications with the media and the public. Job descriptions for each ERP member are provided in **APPENDIX D**. The ERP will train by participating in exercises as noted in **SECTION 6**.

Activation of the ERP may be accomplished in stages. Initially, the First Responder assumes the role of Incident Commander (IC). During a spill incident, the initial IC may be able to respond without assistance from the ERP. If the situation requires more resources, he may request additional personnel or management support from the ERP. This request is made to the Qualified Individual (QI). Depending on the situation, the QI may then assume the role of Incident Commander. The QI would then call out the other ERP members. The ERP activation procedure is provided in **APPENDIX D**.

4.5 Incident Command System/Unified Command

The Incident Command System (ICS) will be used by the Company ERP for spill response. The ERP organization chart is provided in **APPENDIX D** and can be expanded or contracted as necessary.

The Unified Command System (UCS) is the accepted method of organizing key spill management entities within the Incident Command System. The primary entities include:

- Federal On-Scene Coordinator (FOSC)
- State On-Scene Coordinator (SOSC)
- Company Incident Commander

These three people share decision-making authority within the Incident Command System and are each responsible for coordinating other federal, state, and company personnel to form an effective integrated emergency management team. Refer to **APPENDIX D** for detailed checklists of the ERP roles and responsibilities as well as organizational interfaces with external parties.

5.0 TRAINING PROCEDURES

5.1 Exercise Requirements and Schedules

The Company participates in the National Preparedness for Response Exercise Program (PREP) in order to satisfy the exercise requirements of the PHMSA and EPA, following the Sunoco Logistics “PREP Training & Record Guide, EPP-101. Emergency responders, regulatory agencies and other stake holders are routinely invited to observe or participate in table top and equipment deployment drills.

The Facility Manager is responsible for the following aspects:

- Scheduling
- Maintaining records
- Implementing
- Evaluation of the Company's training and exercise program
- Post-drill evaluation improvements

5.2 Post Incident Review

In the case of the following spills from a 49 CFR Part 195 regulated pipeline, a Standard Incident Debriefing Form as noted in **TABLE 5-1** will be completed:

- Any spill resulting in an explosion or fire
- Any spill resulting in the death of any person
- Any spill resulting in an injury requiring inpatient hospitalization
- Any spill impacting a lake, reservoir, stream, river or similar body of water
- Any spill resulting in more than \$50,000.00 in damage including the cost of damage to facilities, spill cleanup, emergency response, value of lost product and damage to property

In the case of spills from other facilities a Standard Incident Debriefing Form as noted in **TABLE 5-1** will be completed on an as determined basis which will be dictated by individual circumstances.

Pertinent facility personnel involved in the incident shall be debriefed (by the Company) within the calendar quarter after termination of operations. A Standard Incident Debriefing Form is provided in **TABLE 5-1**. The primary purpose of the post-incident review is to identify actual or potential deficiencies in the Plan and determine the changes required to correct the efficiencies.

The post-incident review is also intended to identify which response procedures, equipment, and techniques were effective and which were not and the reason(s) why. This type of information is very helpful in the development of a functional Plan by eliminating or modifying those response procedures that are less effective and emphasizing those that are highly effective. This process should also be used for evaluating training drills or exercises. Key agency personnel that were involved in the response may be invited to attend the post-incident review. A copy of the Incident debriefing form may be sent to agency personnel who were invited to the drill, but were unable to attend.

TABLE 5-1 – STANDARD INCIDENT DEBRIEFING FORM

See Appendix F.

5.3 Training Program

The Health, Environment and Safety Training Program (HS-G-027) includes a detailed discussion of training required for personnel, regulations covered by the training, frequency of the specific training, method of training (i.e. computer based, classroom, live training by demonstration, etc.) and training duration.

Training requirements are presented in Table 5-2, below:

TABLE 5-2 – TRAINING REQUIREMENTS

Training Type	Training Characteristics
Training in Use of Oil Spill Plan	<ul style="list-style-type: none">• All field personnel will be trained to properly report/monitor spills• Plan will be reviewed annually with all employees and contract personnel• A record of Personnel Response Training will be maintained.
OSHA Training Requirements	<ul style="list-style-type: none">• All Company responders designated in Plan must have 24 hours of initial spill response training<ul style="list-style-type: none">• Laborers having potential for minimal exposure must have 24 hours of initial oil spill response instruction and 8 hours of actual field experience• Spill responders having potential exposure to hazardous substances at levels exceeding permissible exposure limits must have 40 hours of initial training offsite and 24 hours of actual field experience• On-site management/supervisors required to receive same training as equipment operators/general laborers plus 8 hours of specialized hazardous waste management training• Managers/employees require 8 hours of annual refresher training
Spill Management Team Personnel Training	<ul style="list-style-type: none">• Will follow EPP-101.
Training for Casual Laborers or Volunteers	<ul style="list-style-type: none">• Company will not use casual laborers/volunteers for operations requiring HAZWOPER training
Hydrogen Sulfide (H ₂ S) Monitoring and Procedures	<ul style="list-style-type: none">• Will follow HS-G-027 (Health, Environment, and Safety Training Program) and HS-G-016 (Respiratory Protection Program)
Wildlife	<ul style="list-style-type: none">• Only trained personnel approved by USFWS and appropriate state agency will be used to treat oiled wildlife

Training Type	Training Characteristics
Training Documentation and Record Maintenance	<ul style="list-style-type: none"> • Training activity records will be retained five years for all personnel following completion of training • Company will retain training records indefinitely for individuals assigned specific duties in Plan • Training records will be retained.
Emergency Response Training	<p>The Company has established and conducts a continuing training program to instruct emergency response personnel to:</p> <ul style="list-style-type: none"> • Carry out emergency procedures established under 195.402 that relate to their assignments; • Know the characteristics and hazards of the hazardous liquids or carbon dioxide transported, including, in case of flammable HVL, flammability of mixtures with air, odorless vapors, and water reactions; • Recognize conditions that are likely to cause emergencies, predict the consequences of facility malfunctions or failures and hazardous liquids or carbon dioxide spills, and take appropriate corrective action; • Take steps necessary to control any accidental release of hazardous liquid or carbon dioxide and to minimize the potential for fire, explosion, toxicity, or environmental damage; and • Learn the proper use of fire-fighting procedures and equipment, fire suits, and breathing apparatus by utilizing, where feasible, a simulated pipeline emergency condition. <p>At intervals not exceeding 15 months, but at least once each calendar year, the Company shall:</p> <ul style="list-style-type: none"> • Review with personnel their performance in meeting the objectives of the emergency response training program set forth in 195.403(a), and • Make appropriate changes to the emergency response training program as necessary to ensure that it is effective. <p>The Company requires and verifies that its supervisors maintain a thorough knowledge of that portion of the emergency response procedures established under 195.402 for which they are responsible to ensure compliance.</p>

Training Type	Training Characteristics
Minimum requirements for operator qualification of individuals performing covered tasks on a pipeline facility	<p>The Company has a written qualification program that includes provisions to:</p> <ul style="list-style-type: none"> • Identify covered tasks; • Ensure through evaluation that individuals performing covered tasks are qualified; • Allow individuals that are not qualified pursuant to 49 CFR 195 Subpart G to perform a covered task if directed and observed by an individual that is qualified; • Evaluate an individual if the operator has reason to believe that the individual's performance of a covered task contributed to an accident as defined in Part 195; • Evaluate an individual if the operator has reason to believe that the individual is no longer qualified to perform a covered task; • Communicate changes that affect covered tasks to individuals performing these covered tasks; and • Identify those covered tasks and the intervals at which evaluation of the individual's qualifications is needed. <p>RECORDS</p> <p>Each operator shall maintain records that demonstrate compliance with 49 CFR Part 195, Subpart G. Qualification records shall include:</p> <ul style="list-style-type: none"> • Identification of qualified individuals • Identification of covered tasks the individual is qualified to perform • Date(s) of current qualification <p>Records supporting an individual's current qualification shall be maintained while the individual is performing the covered task. Records of prior qualification and records of individuals no longer performing covered tasks shall be retained for a period of five years.</p>
Breathing	<ul style="list-style-type: none"> • HES Respiratory Protection Training
Exposure	<p>Personal Protective Equipment</p> <ul style="list-style-type: none"> • HES Personal Protective Equipment • Emergency Response Guidebook: Purpose and Uses • Hazard Communication - Generic KW course • HES HAZCOM (face -2-face)

Training Type	Training Characteristics
MX6 Instrument	<ul style="list-style-type: none"> • HES MX6 Gas Meter User Training • HES Operation and Maintenance of Monitoring Equipment
Fit-Testing	<ul style="list-style-type: none"> • HES Respirator Fit-Testing
HES Emergency Response Plan Review (SPCC, FRC, State Plan) This is face-2-face area specific training.	HAZWOPER Awareness - Generic KW course <ul style="list-style-type: none"> • Emergency Response Guidebook: Purpose and Uses • Hazard Communication - Generic KW course • HES HAZCOM (face -2-face) • PREP Emergency Response Plan Review

6.0 **WORST CASE DISCHARGE SUMMARY**

6.1 Worst Case Discharge Scenario

The equipment and personnel to respond to a spill are available from several sources and are provided with the equipment and contractors in **TABLE 2-5**. The following sections are discussions of these scenarios.

Worst case discharge calculations are provided in **SECTION 6.3**.

Upon discovery of a spill, the following procedures would be followed:

1. The First Responder would notify the Area Supervisor/Manager of Operations and Operations Control Center and notifications would be initiated in accordance with **SECTION 2.0**.
2. The Area Supervisor/Manager of Operations would assume the role of Incident Commander/Qualified Individual until relieved and would initiate response actions and notifications in accordance with **SECTION 2.0**. If this were a small spill, the local/company personnel may handle all aspects of the response. Among those actions would be to:
 - Conduct safety assessment and evacuate personnel as needed in accordance with **SECTION 3.2**
 - Direct facility responders to shut down ignition sources
 - Direct facility personnel to position resources in accordance with

SECTION 4.0 and SECTION 7.0

- Complete spill report form provided in **APPENDIX B**
 - Ensure regulatory agencies are notified
3. If this were a small or medium spill, the Qualified Individual/Incident Commander may elect for the First Responder to remain the Incident Commander or to activate selected portions of the Emergency Response Personnel. However, for a large spill, the Qualified Individual would assume the role of Incident Commander and would activate the entire Emergency Response Personnel in accordance with activation procedures described in **SECTION 4.4**.
 4. The Incident Commander would then initiate spill assessment procedures including surveillance operations, trajectory calculations, and spill volume estimating in accordance with **SECTIONS 4.2 and 4.3**.
 5. The Incident Commander would then utilize checklists in **SECTION 4.0** as a reminder of issues to address. The primary focus would be to establish incident priorities and objectives and to brief staff accordingly.
 6. The Emergency Response Personnel would develop the following plans, as appropriate (some of these plans may not be required during a small or medium spill):
 - Site Safety and Health
 - Site Security
 - Incident Action
 - Decontamination
 - Disposal
 - Demobilization
 7. The response would continue until an appropriate level of cleanup is obtained.

6.2 Planning Volume Calculations

Once the worst case discharge volume has been calculated, response resources must be identified to meet the requirements of 49 CFR 194.105(b). Calculations to determine sufficient amount of response equipment necessary to respond to a worst case discharge are described below. A demonstration of the planning volume calculations is provided below.

DOT/PHMSA Portion of Pipeline/Facilities

The worst case discharge (WCD) for the DOT portion of the pipeline and facilities, as defined in 49 CFR 194.105(b), as the largest volume of the following:

1. The pipeline's maximum shut-down response time in hours (based on historic discharge data or in the absence of such data, the operators best estimate), multiplied by the maximum flow rate expressed in barrels per hour (based on the maximum daily capacity of the pipeline), plus the largest drainage volume after shutdown of the line section(s) in the response zone expressed in barrels; or
2. The largest foreseeable discharge for the line section(s) within a response zone, expressed in barrels (cubic meters), based on the maximum historic discharge, if one exists, adjusted for any subsequent corrective or preventative action taken; or
3. If the response zone contains one or more breakout tanks, the capacity of the single largest tank or battery of tanks within a single secondary containment system, adjusted for the capacity or size of the secondary containment system, expressed in barrels.

Under PHMSA's current policy, operators are allowed to reduce the worst case discharge volume derived from 49 CFR 194.105(b)(3) by no more than 75% if an operator is taking certain spill prevention measures for their breakout tanks and presents supporting information in the response plan. An operator can reduce the worst case discharge volume based on breakout tanks in the response zones as follows:

TABLE 6-1 PHMSA PERCENT REDUCTION ALLOWED

SPILL PREVENTION MEASURES	PERCENT REDUCTION ALLOWED
Secondary containment capacity greater than 100% capacity of tank and designed according to NFPA 30	50%
Tank built, rebuilt, and repaired according to API Std 620/650/653	10%
Automatic high-level alarms/shutdowns designed according to NFPA/API RP 2350	5%
Testing/cathodic protection designed according to API Std 650/651/653	5%
Tertiary containment/drainage/treatment per NFPA 30	5% *
Maximum allowable credit or reduction	75%

Note: * - The tanks do not have tertiary containment

The worst case discharge for each response zone was based on the largest volume of the three criteria given above.

The Company has determined the worst case discharge volume to be a catastrophic line failure of the largest line section with the greatest drainage capacity in each response zone or 50 percent of the volume of the largest tank in each zone.

The line sections with the highest throughput and largest drainage volume between block valves on pump stations were chosen to calculate the pipeline worst case discharge. Although the entire discharge volume of each line was used for the worst case discharge, in an actual spill event, it would take days to drain the line completely. The line would be sealed early in the response effort.

All of the breakout tanks in the pipeline system are within adequate secondary containment, therefore, the discharge volumes for the largest tank were determined by adjusting the total tank volume downward by 50% per the company guidelines.

Considering the volume of release from a line break compared to that of historic discharge in each zone and to the volumes released from a tank failure, the line break was found to represent the worst case scenario.

The maximum historic discharge is not applicable for WCD covered by this plan. Given below are the tank and pipeline WCD calculations for this plan. The largest tank volume is as follows:

LOCATION	VOLUME (BBLs)
Longview Station (Tanks 14 & 15)	96,000.00

6.3 Worst Case Discharge Volume Calculations

Tanks

The worst case tank volume is calculated as follows:

Largest Tank X Credit for Containment Tank Standards = Tank Standards Credit

The Company has implemented all of the spill prevention measures listed on the previous page, except tertiary containment. Therefore, the percent reduction allowed for credit equals 50% and the worst case discharge volume is 50% of the total volume.

Longview (96,000.00) X 0.50 = 48,000.00 bbls

Pipelines

The worst case discharge for the pipeline segment is calculated at the 20" Longview to Mayersville - Location: 24.6 miles from block valve (MP 163) to Spearsville Station.

$$WCD = [(DT + ST) \times MF] + DD$$

Where:

WCD = worst case discharge (bbl)

DT + ST = maximum detection time + maximum shut down time in adverse weather
(Generally five minutes except where noted)

MF = maximum flow rate (bph) (using 10,500 bph)

DD = drain down volume (bbl) (internal diameter)

$$WCD = 0.167 \text{ hours} \times 10,500 \text{ bph} + 49,246 \text{ bbls} = 51,000 \text{ bbls}$$

As detailed above, the discharges for the pipeline are larger than discharges for the tank; therefore, the DOT/PHMSA WCD volume for this plan is:

20" Longview to Mayersville Location: 24.6 miles from Spearsville Station to Block Valve (MP 163) - 51,000 bbls

6.4 Product Characteristics and Hazards

Pipeline systems described in this plan may transport various types of commodities including but not limited to:

- Crude Oil

The key chemical and physical characteristics of each of these oils and/or other small quantity products/chemicals are identified in **TABLE 6-2**, below.

TABLE 6-2 CHEMICAL AND PHYSICAL CHARACTERISTICS

COMMON NAME	MSDS NAME	HEALTH HAZARD	FLASH POINT	SPECIAL HAZARD	REACTIVITY	HEALTH HAZARD WARNING STATEMENT
Crude Oil	Appropriate Product Name	1	3	C, H ₂ S	0	May Contain benzene, a carcinogen, or hydrogen sulfide, which is harmful if inhaled; flashpoint varies widely.
Gasoline	Appropriate Product Name	1	3	C	0	May Contain benzene, a carcinogen, which is harmful if inhaled; flashpoint is -45 degrees.
Diesel	Appropriate Product Name	1	2	-	0	May ignite if mixed with other products. Flashpoint is 100 degrees.
Health Hazard	4 = Extremely Hazardous 3 = Hazardous 2 = Warning 1 = Slightly Hazardous 0 = No Unusual Hazard			Fire Hazard (Flash Point)	4 = Below 73° F, 22° C 3 = Below 100° F, 37° C 2 = Below 200° F, 93° C 1 = Above 200° F, 93° C 0 = Will not burn	
Special Hazard	A = Asphyxiant C = Contains Carcinogen W = Reacts with Water Y = Radiation Hazard COR = Corrosive OX = Oxidizer H₂S = Hydrogen Sulfide P = Contents under Pressure T = Hot Material			Reactivity Hazard	4 = May Detonate at Room Temperature 3 = May Detonate with Heat or Shock 2 = Violent Chemical Change with High Temperature and Pressure 1 = Not Stable if Heated 0 = Stable	

7.0 RESPONSE ZONE MAPS AND ASSOCIATED REFERENCE MATERIAL

7.1 Map Overview

The District Overview Map and multiple Pipeline Sensitivity Maps are presented in **APPENDIX E**. The District Overview map includes the entire Longview District Response Zone and illustrates the eleven (11) Pipeline Sensitivity Map locations.

The pipeline sensitivity maps indicate the locations of the worst case discharge, distance between each line section in the response zone, public drinking water intakes within 5 miles of any pipeline segment, and any potentially environmentally sensitive areas located within 1 mile of any pipeline segment.

The following maps are included in this section:

- Longview District Overview Map
- Bastrop Pipeline Sensitivity Map
- Henderson Pipeline Sensitivity Map
- Magnolia Pipeline Sensitivity Map
- Marshall Pipeline Sensitivity Map
- Mineola Pipeline Sensitivity Map
- Monroe North Pipeline Sensitivity Map
- Nacogdoches Pipeline Sensitivity Map
- Shreveport North Pipeline Sensitivity Map
- Tallulah Pipeline Sensitivity Map
- Tyler Pipeline Sensitivity Map
- Corsicana Pipeline Sensitivity Map

A Pipeline Map Feature Index Table, **TABLE E-1**, is presented following the maps. The Pipeline Map Feature Index Table provides an explanation of potentially sensitive areas that are numerically coded on the Pipeline Sensitivity Maps.

8.0 RESPONSE PLAN REVIEW AND UPDATE PROCEDURES

8.1 Facility Response Plan Review Guidelines

In accordance with 49 CFR Part 194.121, this Plan will be reviewed annually and modified to address new or different operating conditions or information included in the Plan. Upon review of the response plan for each five-year period, a will be submitted to PHMSA, as required by 49 CFR § 194.107(c)(x).

Company internal policy states that the Plan will be reviewed at least annually and modified as appropriate. In the event the Company experiences a Worst Case Discharge, the effectiveness of the plan will be evaluated and updated as necessary. If a new or different operating condition or information would substantially affect the implementation of the Plan, the Company will modify the Plan to address such a change and, within 30 days of making such a change, submit the change to PHMSA. Examples of changes in operating conditions that would cause a significant change to the Plan include the following:

CONDITIONS REQUIRING REVISIONS AND SUBMISSIONS

- Relocation or replacement of the transportation system in a way that substantially affects the information included in the Plan, such as a change to the Worst Case Discharge volume.
- A change in the type of oil handled, stored, or transferred that materially alters the required response resources.
- A change in key personnel (Qualified Individuals).
- A change in the name of the Oil Spill Removal Organization (OSRO).
- Any other changes that materially affect the implementation of the Plan.
- A change in the National Oil and Hazardous Substances Pollution Contingency Plan or Area Contingency Plan that has significant impact on the equipment appropriate for response activities.

All requests for changes must be made through the Facility Manager and will be submitted to PHMSA by the Emergency Planning and Preparedness Group.



APPENDIX A

TABLE A.1 - DOT/PHMSA CROSS REFERENCE MATRIX

OPA 90 REQUIREMENTS (49 CFR 194)	LOCATION
Information Summary (Section 1)	
<ul style="list-style-type: none"> For the core plan: 	N/A
<ul style="list-style-type: none"> Name and address of operator 	SECTION 1.1
<ul style="list-style-type: none"> For each Response Zone which contains one or more line sections that meet the criteria for determining significant and substantial harm (§194.103), listing and description of Response Zones, including county(s) and state(s) 	TABLE 1.2
<ul style="list-style-type: none"> For each Response Zone appendix: 	N/A
<ul style="list-style-type: none"> Information summary for core plan 	SECTION 1.1
<ul style="list-style-type: none"> QI names and telephone numbers, available on 24-hr basis 	TABLE 1.1
<ul style="list-style-type: none"> Description of Response Zone, including county(s) and state(s) in which a worst case discharge could cause substantial harm to the environment 	TABLE 1.1, TABLE 1.2
<ul style="list-style-type: none"> List of line sections contained in Response Zone, identified by milepost or survey station or other operator designation 	TABLE 1.2
<ul style="list-style-type: none"> Basis for operator's determination of significant and substantial harm 	TABLE 1.2
<ul style="list-style-type: none"> The type of oil and volume of the worst case discharge 	TABLE 1.2, SECTION 6.0
<ul style="list-style-type: none"> Certification that the operator has obtained, through contract or other approved means, the necessary private personnel and equipment to respond, to the maximum extent practicable, to a worst case discharge or threat of such discharge 	SECTION 1.3
Notification Procedures (Section 2)	
<ul style="list-style-type: none"> Notification requirements that apply in each area of operation of pipelines covered by the plan, including applicable state or local requirements 	SECTION 2
<ul style="list-style-type: none"> Checklist of notifications the operator or Qualified Individual is required to make under the response plan, listed in the order of priority 	TABLE 2.2, TABLE 2.3
<ul style="list-style-type: none"> Name of persons (individuals or organizations) to be notified of discharge, indicating whether notification is to be performed by operating personnel or other personnel 	TABLE 2.2, TABLE 2.3
<ul style="list-style-type: none"> Procedures for notifying Qualified Individuals 	SECTION 2.1, TABLE 2.2
<ul style="list-style-type: none"> Primary and secondary communication methods by which notifications can be made 	TABLE 2.3

OPA 90 REQUIREMENTS (49 CFR 194)	LOCATION
<ul style="list-style-type: none"> Information to be provided in the initial and each follow-up notification, including the following: <ul style="list-style-type: none"> Name of pipeline Time of discharge Location of discharge Name of oil recovered Reason for discharge (e.g. material failure, excavation damage, corrosion) Estimated volume of oil discharged Weather conditions on scene Actions taken or planned by persons on scene 	SECTION 2.2
Spill Detection and On-Scene Spill Mitigation Procedures (Section 3)	
<ul style="list-style-type: none"> Methods of initial discharge detection 	SECTION 3.1
<ul style="list-style-type: none"> Procedures, listed in order of priority, that personnel are required to follow in responding to a pipeline emergency to mitigate or prevent any discharge from the pipeline 	SECTION 3.2, TABLE 3.1
<ul style="list-style-type: none"> List of equipment that may be needed in response activities based on land and navigable waters including: <ul style="list-style-type: none"> Transfer hoses and pumps Portable pumps and ancillary equipment Facilities available to transport and receive oil from a leaking pipeline Identification of the availability, location, and contact phone numbers to obtain equipment for response activities on a 24-hour basis Identification of personnel and their location, telephone numbers, and responsibilities for use of equipment in response activities on a 24-hour basis 	SECTION 3.3, APPENDIX C
Response Activities (Section 4)	
<ul style="list-style-type: none"> Responsibilities of, and actions to be taken by, operating personnel to initiate and supervise response actions pending the arrival of the Qualified Individual or other response resources identified in the response plan 	SECTION 4.1, TABLE 4.1
<ul style="list-style-type: none"> Qualified Individual's responsibilities and authority, including notification of the response resources identified in the response plan 	SECTION 4.1, TABLE 4.1
<ul style="list-style-type: none"> Procedures for coordinating the actions of the operator or Qualified Individual with the action of the OSC responsible for monitoring or directing those actions 	TABLE 4.1
<ul style="list-style-type: none"> Oil spill response organizations (OSRO) available through contract or other approved means, to respond to a worst case discharge to the maximum extent practicable 	TABLE 2.5, APPENDIX C

OPA 90 REQUIREMENTS (49 CFR 194)	LOCATION
<ul style="list-style-type: none"> For each organization identified under paragraph (d), a listing of: <ul style="list-style-type: none"> Equipment and supplies available Trained personnel necessary to continue operation of the equipment and staff the oil spill removal organization for the first seven days of the response 	APPENDIX C
List of Contacts (Section 5)	
<ul style="list-style-type: none"> List of persons the Plan requires the operator to contact 	TABLE 1.1, TABLE 2.1
<ul style="list-style-type: none"> Qualified individuals for the operator areas of operation 	TABLE 1.1
<ul style="list-style-type: none"> Applicable insurance representatives or surveyors for the operator's areas of operation 	TABLE 1.1
<ul style="list-style-type: none"> Persons or organizations to notify for activation of response resources 	TABLE 2.1, TABLE 2.2, TABLE 2.4
Training Procedures (Section 6)	
<ul style="list-style-type: none"> Description of training procedures and programs of the operations 	SECTION 5
Drill Procedures (Section 7)	
<ul style="list-style-type: none"> Announced and unannounced drills 	TABLE 5.2
<ul style="list-style-type: none"> Types of drills and their frequencies; for example: <ul style="list-style-type: none"> Manned pipeline emergency procedures and qualified individual notification drills conducted quarterly Drills involving emergency actions by assigned operating or maintenance personnel and notification of qualified individual on pipeline facilities which are normally unmanned, conducted quarterly Shore-based spill management team (SMT) tabletop drills conducted yearly Oil spill removal organization field equipment deployment drills conducted yearly A drill that exercises entire response plan for each Response Zone, would be conducted at least once every three years 	SECTION 5
Response Plan Review and Update Procedures (Section 8)	
<ul style="list-style-type: none"> Procedures to meet §194.121 	SECTION 8.1
<ul style="list-style-type: none"> Procedures to review plan after a worst case discharge and to evaluate and record the plan's effectiveness 	SECTION 8.1
Response Zone Appendices (Section 9)	
<ul style="list-style-type: none"> Name and telephone number of the qualified individual 	TABLE 1.1
<ul style="list-style-type: none"> Notification procedures 	SECTION 2

OPA 90 REQUIREMENTS (49 CFR 194)	LOCATION
<ul style="list-style-type: none"> • Spill detection and mitigation procedures 	SECTION 3.0
<ul style="list-style-type: none"> • Name, address, and telephone number of oil spill response organizations 	TABLE 2.5
<ul style="list-style-type: none"> • Response activities and response resources including— <ul style="list-style-type: none"> • Equipment and supplies necessary to meet §194.115, and • The trained personnel necessary to sustain operation of the equipment and to staff the oil spill removal organization and spill management team for the first 7 days of the response 	TABLE 2.5, APPENDIX C
<ul style="list-style-type: none"> • Names and telephone numbers of Federal, state and local agencies which the operator expects to assume pollution response responsibilities 	TABLE 2.3, TABLE 2.4
<ul style="list-style-type: none"> • The worst case discharge volume 	SECTION 6.0
<ul style="list-style-type: none"> • The method used to determine the worst case discharge volume, with calculations 	SECTION 6.3
<ul style="list-style-type: none"> • A map that clearly shows: <ul style="list-style-type: none"> • Location of worst case discharge • Distance between each line section in the Response Zone: <ul style="list-style-type: none"> • Each potentially affected public drinking water intake, lake, river, and stream within a radius of five miles of the line section • Each potentially affected environmentally sensitive area within a radius of one mile of the line section 	APPENDIX E
<ul style="list-style-type: none"> • Piping diagram and plan-profile drawing of each line section; (may be kept separate from the response plan if the location is identified) 	APPENDIX E
<ul style="list-style-type: none"> • For every oil transported by each pipeline in the response zone, emergency response data that: <ul style="list-style-type: none"> • Include name, description, physical and chemical characteristics, health and safety hazards, and initial spill handling and firefighting methods • Meet 29 CFR 1910.1200 or 49 CFR 172.602 	SECTION 6.4



APPENDIX B



U.S. Department of Transportation
Pipeline and Hazardous Materials
Safety Administration

ACCIDENT REPORT – HAZARDOUS LIQUID PIPELINE SYSTEMS

Report Date _____

No. _____
(DOT Use Only)

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0047. Public reporting for this collection of information is estimated to be approximately 10 hours per response (5 hours for a small release), including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

INSTRUCTIONS

Important: Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at <http://www.phmsa.dot.gov/pipeline>. Note: Certain low consequence accidents only require the information indicated in the shaded fields.

PART A – KEY REPORT INFORMATION

*Report Type: (select all that apply) ☐ Original ☐ Supplemental ☐ Final

*1. Operator's OPS-issued Operator Identification Number (OPID): / / / / / / /

*2. Name of Operator: _____

*3. Address of Operator:

*3.a _____
(Street Address)

*3.b _____
(City)

*3.c State: / /

*3.d Zip Code: / / / / / - / / / /

*4. Local time (24-hr clock) and date of the Accident:

/ / / / / / / /
Hour Month Day Year

*5. Location of Accident:

Latitude: / / / . / / / / / /

Longitude: - / / / / . / / / / / /

6. National Response Center Report Number (if applicable):

/ / / / / / /

7. Local time (24-hr clock) and date of initial telephonic report to the National Response Center (if applicable):

/ / / / / / / /
Hour Month Day Year

*8. Commodity released: (select only one, based on predominant volume released)

☐ Crude Oil

☐ Refined and/or Petroleum Product (non-HVL) which is a Liquid at Ambient Conditions

☐ Gasoline (non-Ethanol)

☐ Diesel, Fuel Oil, Kerosene, Jet Fuel

☐ Mixture of Refined Products (transmix or other mixture)

☐ Other ➡ Name: _____

☐ HVL or Other Flammable or Toxic Fluid which is a Gas at Ambient Conditions

☐ Anhydrous Ammonia

☐ LPG (Liquefied Petroleum Gas) / NGL (Natural Gas Liquid)

☐ Other HVL ➡ Name: _____

☐ CO₂ (Carbon Dioxide)

☐ Biofuel / Alternative Fuel (including ethanol blends)

☐ Fuel Grade Ethanol

☐ Ethanol Blend ➡ % Ethanol: / / /

☐ Biodiesel ➡ Blend (e.g. B2, B20, B100): B / / / /

☐ Other ➡ Name: _____

*9. Estimated volume of commodity released unintentionally: / / / / / / / / / / Barrels

10. Estimated volume of intentional and/or controlled release/blowdown: / / / / / / / / / / Barrels

*11. Estimated volume of commodity recovered: / / / / / / / / / / Barrels

<p>*12. Were there fatalities? <input type="radio"/> Yes <input type="radio"/> No</p> <p>If Yes, specify the number in each category:</p> <p>*12.a Operator employees <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*12.b Contractor employees working for the Operator <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*12.c Non-Operator emergency responders <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*12.d Workers working on the right-of-way, but NOT associated with this Operator <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*12.e General public <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>12.f Total fatalities (sum of above) <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p>	<p>*13. Were there injuries requiring inpatient hospitalization? <input type="radio"/> Yes <input type="radio"/> No</p> <p>If Yes, specify the number in each category:</p> <p>*13.a Operator employees <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*13.b Contractor employees working for the Operator <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*13.c Non-Operator emergency responders <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*13.d Workers working on the right-of-way, but NOT associated with this Operator <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>*13.e General public <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p> <p>13.f Total injuries (sum of above) <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> /</p>
---	---

14. Was the pipeline/facility shut down due to the Accident?
☐ Yes ☐ No ➡ Explain: _____

If Yes, complete Questions 14.a and 14.b: *(use local time, 24-hr clock)*

14.a Local time and date of shutdown / / / / / / / / / /

Hour
Month
Day
Year

14.b Local time pipeline/facility restarted / / / / / / / / / / ☐ Still shut down*

Hour
Month
Day
Year

*(*Supplemental Report required)*

*15. Did the commodity ignite? ☐ Yes ☐ No

*16. Did the commodity explode? ☐ Yes ☐ No

17. Number of general public evacuated: / / / / / / /

18. Time sequence: *(use local time, 24-hour clock)*

18.a Local time Operator identified Accident / / / / / / / / / /

Hour
Month
Day
Year

18.b Local time Operator resources arrived on site / / / / / / / / / /

Hour
Month
Day
Year

PART B – ADDITIONAL LOCATION INFORMATION

*1. Was the origin of the Accident onshore?

☐ Yes (Complete Questions 2-12)☐ No (Complete Questions 13-15)**If Onshore:**

*2. State: / /

*3. Zip Code: / / - / / /

4. City 5. County or Parish

6. Operator-designated location: (select only one)

☐ Milepost/Valve Station (specify in shaded area below)☐ Survey Station No. (specify in shaded area below)

/ / / / / / / / / / / / / / / /

7. Pipeline/Facility name: _____

8. Segment name/ID: _____

*9. Was Accident on Federal land, other than the Outer Continental Shelf (OCS)? ☐ Yes ☐ No

*10. Location of Accident: (select only one)

☐ Totally contained on Operator-controlled property☐ Originated on Operator-controlled property, but then flowed or migrated off the property☐ Pipeline right-of-way

*11. Area of Accident (as found): (select only one)

☐ Tank, including attached appurtenances☐ Underground ⇨ Specify: ☐ Under soil☐ Under a building☐ Under pavement☐ Exposed due to excavation☐ In underground enclosed space (e.g., vault)☐ Other _____

Depth-of-Cover (in): / / / / /

☐ Aboveground ⇨ Specify:☐ Typical aboveground facility piping or appurtenance☐ Overhead crossing☐ In or spanning an open ditch☐ Inside a building ☐ Inside other enclosed space☐ Other _____☐ Transition Area ⇨ Specify: ☐ Soil/air interface ☐ Wall☐ sleeve ☐ Pipe support or other close contact area☐ Other _____*12. Did Accident occur in a crossing?: ☐ Yes ☐ No

If Yes, specify type below:

☐ Bridge crossing ⇨ Specify: ☐ Cased ☐ Uncased☐ Railroad crossing ⇨ (select all that apply)☐ Cased☐ Uncased☐ Bored/drilled☐ Road crossing ⇨ (select all that apply)☐ Cased☐ Uncased☐ Bored/drilled☐ Water crossing⇨ Specify: ☐ Cased ☐ Uncased

Name of body of water, if commonly known: _____

Approx. water depth (ft) at the point of the Accident:

/ / / / /

(select only one of the following)

☐ Shoreline/Bank crossing☐ Below water, pipe in bored/drilled crossing☐ Below water, pipe buried below bottom (NOT in bored/drilled crossing)☐ Below water, pipe on or above bottom**If Offshore:**

*13. Approximate water depth (ft.) at the point of the Accident:

/ / / / /

*14. Origin of Accident:

☐ In State waters

⇨ Specify: State: / / /

Area: _____

Block/Tract #: / / / / /

Nearest County/Parish: _____

☐ On the Outer Continental Shelf (OCS)

⇨ Specify: Area: _____

Block #: / / / / /

*15. Area of Accident: (select only one)

☐ Shoreline/Bank crossing or shore approach☐ Below water, pipe buried or jetted below seabed☐ Below water, pipe on or above seabed☐ Splash Zone of riser☐ Portion of riser outside of Splash Zone, including riser bend☐ Platform

PART C – ADDITIONAL FACILITY INFORMATION	
*1. Is the pipeline or facility: <input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	
*2. Part of system involved in Accident: <i>(select only one)</i> <input type="checkbox"/> Onshore Breakout Tank or Storage Vessel, Including Attached Appurtenances ➡ <input type="radio"/> Atmospheric or Low Pressure <div style="text-align: right;"><input type="radio"/> Pressurized</div> <input type="checkbox"/> Onshore Terminal/Tank Farm Equipment and Piping <input type="checkbox"/> Onshore Equipment and Piping Associated with Belowground Storage <input type="checkbox"/> Onshore Pump/Meter Station Equipment and Piping <input type="checkbox"/> Onshore Pipeline, Including Valve Sites <input type="checkbox"/> Offshore Platform/Deepwater Port, Including Platform-mounted Equipment and Piping <input type="checkbox"/> Offshore Pipeline, Including Riser and Riser Bend	
*3. Item involved in Accident: <i>(select only one)</i>	
<input type="checkbox"/> Pipe ➡ Specify: <input type="radio"/> Pipe Body <input type="radio"/> Pipe Seam 3.a Nominal diameter of pipe (in): / / / / / / 3.b Wall thickness (in): / / / / / / 3.c SMYS (Specified Minimum Yield Strength) of pipe (psi): / / / / / / 3.d Pipe specification: _____ 3.e Pipe Seam ➡ Specify: <input type="radio"/> Longitudinal ERW - High Frequency <input type="radio"/> Single SAW <input type="radio"/> Flash Welded <div style="margin-left: 100px;"> <input type="radio"/> Longitudinal ERW - Low Frequency <input type="radio"/> DSAW <input type="radio"/> Continuous Welded <input type="radio"/> Longitudinal ERW – Unknown Frequency <input type="radio"/> Furnace Butt Welded <input type="radio"/> Spiral Welded ERW <input type="radio"/> Spiral Welded SAW <input type="radio"/> Spiral Welded DSAW <input type="radio"/> Lap Welded <input type="radio"/> Seamless <input type="radio"/> Other _____ </div> 3.f Pipe manufacturer: _____ 3.g Year of manufacture: / / / / / / 3.h Pipeline coating type at point of Accident <div style="margin-left: 40px;"> ➡ Specify: <input type="radio"/> Fusion Bonded Epoxy <input type="radio"/> Coal Tar <input type="radio"/> Asphalt <input type="radio"/> Polyolefin <input type="radio"/> Extruded Polyethylene <input type="radio"/> Field Applied Epoxy <input type="radio"/> Cold Applied Tape <input type="radio"/> Paint <input type="radio"/> Composite <input type="radio"/> None <input type="radio"/> Other _____ </div> <input type="checkbox"/> Weld, including heat-affected zone ➡ Specify: <input type="radio"/> Pipe Girth Weld <input type="radio"/> Other Butt Weld <input type="radio"/> Fillet Weld <input type="radio"/> Other _____ <input type="checkbox"/> Valve <input type="radio"/> Mainline ➡ Specify: <input type="radio"/> Butterfly <input type="radio"/> Check <input type="radio"/> Gate <input type="radio"/> Plug <input type="radio"/> Ball <input type="radio"/> Globe <div style="margin-left: 100px;"><input type="radio"/> Other _____</div> 3.i Mainline valve manufacturer: _____ 3.j Year of manufacture: / / / / / / <div style="background-color: #f0f0f0; padding: 10px; margin-top: 10px;"> <input type="radio"/> Relief Valve <input type="radio"/> Auxiliary or Other Valve <input type="checkbox"/> Pump <input type="checkbox"/> Meter/Prover <input type="checkbox"/> Scraper/Pig Trap <input type="checkbox"/> Sump/Separator <input type="checkbox"/> Repair Sleeve or Clamp <input type="checkbox"/> Hot Tap Equipment <input type="checkbox"/> Stopple Fitting <input type="checkbox"/> Flange <input type="checkbox"/> Relief Line <input type="checkbox"/> Auxiliary Piping (e.g. drain lines) <input type="checkbox"/> Tubing <input type="checkbox"/> Instrumentation <input type="checkbox"/> Tank/Vessel ➡ Specify: <input type="radio"/> Single Bottom System <input type="radio"/> Double Bottom System <input type="radio"/> Tank Shell <input type="radio"/> Chime <div style="margin-left: 100px;"> <input type="radio"/> Roof/Roof Seal <input type="radio"/> Roof Drain System <input type="radio"/> Mixer <input type="radio"/> Pressure Vessel Head or Wall <input type="radio"/> Appurtenance <input type="radio"/> Other _____ </div> </div> <input type="checkbox"/> Other _____	
4. Year item involved in Accident was installed: / / / / / /	

*5. Material involved in Accident: (*select only one*)

☐ Carbon Steel

☐ Material other than Carbon Steel ➡ Specify: _____

*6. Type of Accident involved: (*select only one*)

☐ Mechanical Puncture ➡ Approx. size: /_/_/_/_/./_/in. (axial) by /_/_/_/_/./_/in. (circumferential)

☐ Leak ➡ Select Type: ☐ Pinhole ☐ Crack ☐ Connection Failure ☐ Seal or Packing ☐ Other

☐ Rupture ➡ Select Orientation: ☐ Circumferential ☐ Longitudinal ☐ Other _____
Approx. size: /_/_/_/_/./_/ in. (widest opening) by /_/_/_/_/./_/in. (length circumferentially or axially)

☐ Overfill or Overflow

☐ Other ➡ Describe: _____

PART D – ADDITIONAL CONSEQUENCE INFORMATION																				
<p>1. Wildlife impact: <input type="radio"/> Yes <input type="radio"/> No</p> <p style="margin-left: 20px;">1.a If Yes, specify all that apply:</p> <div style="margin-left: 40px;"> <input type="checkbox"/> Fish/aquatic <input type="checkbox"/> Birds <input type="checkbox"/> Terrestrial </div> <p>*2. Soil contamination: <input type="radio"/> Yes <input type="radio"/> No</p> <p>3. Long term impact assessment performed or planned: <input type="radio"/> Yes <input type="radio"/> No</p> <p>4. Anticipated remediation: <input type="radio"/> Yes <input type="radio"/> No (not needed)</p> <p style="margin-left: 20px;">4.a If Yes, specify all that apply:</p> <div style="margin-left: 40px;"> <input type="checkbox"/> Surface water <input type="checkbox"/> Groundwater <input type="checkbox"/> Soil <input type="checkbox"/> Vegetation <input type="checkbox"/> Wildlife </div> <p>*5. Water contamination: <input type="radio"/> Yes ➔ (Complete 5.a – 5.c below) <input type="radio"/> No</p> <p style="margin-left: 20px;">*5.a Specify all that apply:</p> <div style="margin-left: 40px;"> <input type="checkbox"/> Ocean/Seawater <input type="checkbox"/> Surface <input type="checkbox"/> Groundwater <input type="checkbox"/> Drinking water ➔ (Select one or both) <input type="radio"/> Private Well <input type="radio"/> Public Water Intake </div> <p style="margin-left: 20px;">*5.b Estimated amount released in or reaching water: / / / / , / / / / . / / / Barrels</p> <p style="margin-left: 20px;">*5.c Name of body of water, if commonly known: _____</p>																				
<p>*6. At the location of this Accident, had the pipeline segment or facility been identified as one that “could affect” a High Consequence Area (HCA) as determined in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No</p> <p>*7. Did the released commodity reach or occur in one or more High Consequence Area (HCA)? <input type="radio"/> Yes <input type="radio"/> No</p> <p style="margin-left: 20px;">7.a If Yes, specify HCA type(s): (select all that apply)</p> <div style="margin-left: 40px;"> <input type="checkbox"/> Commercially Navigable Waterway Was this HCA identified in the “could affect” determination for this Accident site in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No </div> <div style="margin-left: 40px;"> <input type="checkbox"/> High Population Area Was this HCA identified in the “could affect” determination for this Accident site in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No </div> <div style="margin-left: 40px;"> <input type="checkbox"/> Other Populated Area Was this HCA identified in the “could affect” determination for this Accident site in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No </div> <div style="margin-left: 40px;"> <input type="checkbox"/> Unusually Sensitive Area (USA) – Drinking Water Was this HCA identified in the “could affect” determination for this Accident site in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No </div> <div style="margin-left: 40px;"> <input type="checkbox"/> Unusually Sensitive Area (USA) – Ecological Was this HCA identified in the “could affect” determination for this Accident site in the Operator’s Integrity Management Program? <input type="radio"/> Yes <input type="radio"/> No </div>																				
<p>*8. Estimated cost to Operator:</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">8.a Estimated cost of public and non-Operator private property damage paid/reimbursed by the Operator</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td>8.b Estimated cost of commodity lost</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td>8.c Estimated cost of Operator’s property damage & repairs</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td>8.d Estimated cost of Operator’s emergency response</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td>8.e Estimated cost of Operator’s environmental remediation</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td>8.f Estimated other costs</td> <td>\$ / / / / , / / / / . / / /</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="vertical-align: top;">Describe _____</td> <td></td> </tr> <tr> <td>8.g Estimated total costs (sum of above)</td> <td>\$ / / / / , / / / / . / / /</td> </tr> </table>			8.a Estimated cost of public and non-Operator private property damage paid/reimbursed by the Operator	\$ / / / / , / / / / . / / /	8.b Estimated cost of commodity lost	\$ / / / / , / / / / . / / /	8.c Estimated cost of Operator’s property damage & repairs	\$ / / / / , / / / / . / / /	8.d Estimated cost of Operator’s emergency response	\$ / / / / , / / / / . / / /	8.e Estimated cost of Operator’s environmental remediation	\$ / / / / , / / / / . / / /	8.f Estimated other costs	\$ / / / / , / / / / . / / /			Describe _____		8.g Estimated total costs (sum of above)	\$ / / / / , / / / / . / / /
8.a Estimated cost of public and non-Operator private property damage paid/reimbursed by the Operator	\$ / / / / , / / / / . / / /																			
8.b Estimated cost of commodity lost	\$ / / / / , / / / / . / / /																			
8.c Estimated cost of Operator’s property damage & repairs	\$ / / / / , / / / / . / / /																			
8.d Estimated cost of Operator’s emergency response	\$ / / / / , / / / / . / / /																			
8.e Estimated cost of Operator’s environmental remediation	\$ / / / / , / / / / . / / /																			
8.f Estimated other costs	\$ / / / / , / / / / . / / /																			
Describe _____																				
8.g Estimated total costs (sum of above)	\$ / / / / , / / / / . / / /																			

$\frac{1}{2}$ $\frac{1}{3}$ $\frac{1}{4}$ $\frac{1}{5}$ $\frac{1}{6}$ $\frac{1}{7}$

///,///,///,///,///

- ☐ Pressure did not exceed MOP
- ☐ Pressure exceeded MOP, but did not exceed 110% of MOP
- ☐ Pressure exceeded 110% of MOP

☐ No

☐ Yes \Rightarrow (Complete 4.a and 4.b below)

☐ Yes ☐ No

☐ PHMSA ☐ State ☐ Not mandated

☐ No

☐ Yes ➡ (Complete 5.a – 5.f below)

☐ Manual ☐ Automatic ☐ Remotely Controlled

☐ Manual ☐ Automatic ☐ Remotely Controlled
☐ Check Valve

$\frac{1}{2}$ $\frac{1}{3}$ $\frac{1}{4}$ $\frac{1}{5}$ $\frac{1}{6}$ $\frac{1}{7}$ $\frac{1}{8}$

☐ Yes

☐ No ➡ Which physical features limit tool accommodation? *(select all that apply)*

- ☐ Changes in line pipe diameter
- ☐ Presence of unsuitable mainline valves
- ☐ Tight or mitered pipe bends
- ☐ Other passage restrictions (i.e. unbarred tee's, projecting instrumentation, etc.)
- ☐ Extra thick pipe wall (applicable only for magnetic flux leakage internal inspection tools)
- ☐ Other ➡ Describe: _____

☐ No

☐ Yes ➡ Which operational factors complicate execution? (select all that apply)

- ☐ Excessive debris or scale, wax, or other wall build-up
- ☐ Low operating pressure(s)
- ☐ Low flow or absence of flow
- ☐ Incompatible commodity
- ☐ Other ➡ Describe: _____

<input type="checkbox"/> > 20% SMYS Regulated Trunkline/Transmission	<input type="checkbox"/> > 20% SMYS Regulated Gathering
<input type="checkbox"/> ≤ 20% SMYS Regulated Trunkline/Transmission	<input type="checkbox"/> ≤ 20% SMYS Regulated Gathering
<input type="checkbox"/> ≤ 20% SMYS "Unregulated" Trunkline/Transmission	<input type="checkbox"/> ≤ 20% SMYS "Unregulated" Gathering

<input type="checkbox"/> > 20% SMYS Regulated Trunkline/Transmission	<input type="checkbox"/> > 20% SMYS Regulated Gathering
<input type="checkbox"/> ≤ 20% SMYS Regulated Trunkline/Transmission	<input type="checkbox"/> ≤ 20% SMYS Regulated Gathering
<input type="checkbox"/> ≤ 20% SMYS “Unregulated” Trunkline/Transmission	<input type="checkbox"/> ≤ 20% SMYS “Unregulated” Gathering

*6. Was a Supervisory Control and Data Acquisition (SCADA)-based system in place on the pipeline or facility involved in the Accident?

☐ No

☐ Yes ➡

6.a Was it operating at the time of the Accident? ☐ Yes ☐ No

6.b Was it fully functional at the time of the Accident? ☐ Yes ☐ No

6.c Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the detection of the Accident? ☐ Yes ☐ No

6.d Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Accident? ☐ Yes ☐ No

*7. Was a CPM leak detection system in place on the pipeline or facility involved in the Accident?

☐ No

☐ Yes ➡

7.a Was it operating at the time of the Accident? ☐ Yes ☐ No

7.b Was it fully functional at the time of the Accident? ☐ Yes ☐ No

7.c Did CPM leak detection system information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the detection of the Accident? ☐ Yes ☐ No

7.d Did CPM leak detection system information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Accident? ☐ Yes ☐ No

*8. How was the Accident initially identified for the Operator? (select only one)

☐ CPM leak detection system or SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations)

☐ Static Shut-in Test or Other Pressure or Leak Test

☐ Controller

☐ Air Patrol

☐ Notification from Public

☐ Notification from Third Party that caused the Accident

☐ Local Operating Personnel, including contractors

☐ Ground Patrol by Operator or its contractor

☐ Notification from Emergency Responder

☐ Other _____

*8.a If "Controller", "Local Operating Personnel, including contractors", "Air Patrol", or "Ground Patrol by Operator or its contractor" is selected in Question 8, specify the following: (select only one)

☐ Operator employee

☐ Contractor working for the Operator

*9. Was an investigation initiated into whether or not the controller(s) or control room issues were the cause of or a contributing factor to the Accident? (select only one)

☐ Yes, but the investigation of the control room and/or controller actions has not yet been completed by the Operator (Supplemental Report required)

☐ No, the facility was not monitored by a controller(s) at the time of the Accident

☐ No, the Operator did not find that an investigation of the controller(s) actions or control room issues was necessary due to: (provide an explanation for why the Operator did not investigate)

☐ Yes, specify investigation result(s): (select all that apply)

☐ Investigation reviewed work schedule rotations, continuous hours of service (while working for the Operator) and other factors associated with fatigue

☐ Investigation did NOT review work schedule rotations, continuous hours of service (while working for the Operator) and other factors associated with fatigue (provide an explanation for why not)

☐ Investigation identified no control room issues

☐ Investigation identified no controller issues

☐ Investigation identified incorrect controller action or controller error

☐ Investigation identified that fatigue may have affected the controller(s) involved or impacted the involved controller(s) response

☐ Investigation identified incorrect procedures

☐ Investigation identified incorrect control room equipment operation

☐ Investigation identified maintenance activities that affected control room operations, procedures, and/or controller response

☐ Investigation identified areas other than those above ➡ Describe: _____

PART F – DRUG & ALCOHOL TESTING INFORMATION

*1. As a result of this Accident, were any Operator employees tested under the post-accident drug and alcohol testing requirements of DOT's Drug & Alcohol Testing regulations?

☐ No

☐ Yes ➡ *1.a Specify how many were tested: / /

*1.b Specify how many failed: / /

*2. As a result of this Accident, were any Operator contractor employees tested under the post-accident drug and alcohol testing requirements of DOT's Drug & Alcohol Testing regulations?

☐ No

☐ Yes ➡ *2.a Specify how many were tested: / /

*2.b Specify how many failed: / /

PART G – APPARENT CAUSE	Select only one box from PART G in the shaded column on the left representing the APPARENT Cause of the Accident, and answer the questions on the right. Describe secondary, contributing, or root causes of the Accident in the narrative (PART H).
G1 - Corrosion Failure – *only one sub-cause can be picked from shaded left-hand column	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <input type="checkbox"/> External Corrosion </div>	<p>*1. Results of visual examination: <input type="radio"/> Localized Pitting <input type="radio"/> General Corrosion <input type="radio"/> Other _____</p> <p>*2. Type of corrosion: <i>(select all that apply)</i> <input type="radio"/> Galvanic <input type="radio"/> Atmospheric <input type="radio"/> Stray Current <input type="radio"/> Microbiological <input type="radio"/> Selective Seam <input type="radio"/> Other _____</p> <p>*3. The type(s) of corrosion selected in Question 2 is based on the following: <i>(select all that apply)</i> <input type="radio"/> Field examination <input type="radio"/> Determined by metallurgical analysis <input type="radio"/> Other _____</p> <p>*4. Was the failed item buried under the ground? <input type="radio"/> Yes ➞ *4.a Was failed item considered to be under cathodic protection at the time of the Accident? <input type="radio"/> Yes ➞ Year protection started: / / / / / <input type="radio"/> No *4.b Was shielding, tenting, or disbonding of coating evident at the point of the Accident? <input type="radio"/> Yes <input type="radio"/> No *4.c Has one or more Cathodic Protection Survey been conducted at the point of the Accident? <input type="radio"/> Yes, CP Annual Survey ➞ Most recent year conducted: / / / / / <input type="radio"/> Yes, Close Interval Survey ➞ Most recent year conducted: / / / / / <input type="radio"/> Yes, Other CP Survey ➞ Most recent year conducted: / / / / / <input type="radio"/> No <input type="radio"/> No ➞ 4.d Was the failed item externally coated or painted? <input type="radio"/> Yes <input type="radio"/> No</p> <p>*5. Was there observable damage to the coating or paint in the vicinity of the corrosion? <input type="radio"/> Yes <input type="radio"/> No</p>
<div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Internal Corrosion </div>	<p>*6. Results of visual examination: <input type="radio"/> Localized Pitting <input type="radio"/> General Corrosion <input type="radio"/> Not cut open <input type="radio"/> Other _____</p> <p>*7. Cause of corrosion: <i>(select all that apply)</i> <input type="radio"/> Corrosive Commodity <input type="radio"/> Water drop-out/Acid <input type="radio"/> Microbiological <input type="radio"/> Erosion <input type="radio"/> Other _____</p> <p>*8. The cause(s) of corrosion selected in Question 7 is based on the following: <i>(select all that apply)</i> <input type="radio"/> Field examination <input type="radio"/> Determined by metallurgical analysis <input type="radio"/> Other _____</p> <p>*9. Location of corrosion: <i>(select all that apply)</i> <input type="radio"/> Low point in pipe <input type="radio"/> Elbow <input type="radio"/> Other _____</p> <p>*10. Was the commodity treated with corrosion inhibitors or biocides? <input type="radio"/> Yes <input type="radio"/> No</p> <p>11. Was the interior coated or lined with protective coating? <input type="radio"/> Yes <input type="radio"/> No</p> <p>12. Were cleaning/dewatering pigs (or other operations) routinely utilized? <input type="radio"/> Not applicable - Not mainline pipe <input type="radio"/> Yes <input type="radio"/> No</p> <p>13. Were corrosion coupons routinely utilized? <input type="radio"/> Not applicable - Not mainline pipe <input type="radio"/> Yes <input type="radio"/> No</p>
Complete the following if any Corrosion Failure sub-cause is selected AND the “Item Involved in Accident” (from PART C, Question 3) is Tank/Vessel.	
<p>14. List the year of the most recent inspections:</p> <div style="display: flex; justify-content: space-between;"> <div> 14.a API Std 653 Out-of-Service Inspection / / / / / 14.b API Std 653 In-Service Inspection / / / / / </div> <div> <input type="radio"/> No Out-of-Service Inspection completed <input type="radio"/> No In-Service Inspection completed </div> </div>	

Complete the following if any Corrosion Failure sub-cause is selected AND the "Item Involved in Accident" (from PART C, Question 3) is Pipe or Weld.

15. Has one or more internal inspection tool collected data at the point of the Accident?

☐ Yes ☐ No

15.a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:

- ☐ Magnetic Flux Leakage Tool / / / / /
- ☐ Ultrasonic / / / / /
- ☐ Geometry / / / / /
- ☐ Caliper / / / / /
- ☐ Crack / / / / /
- ☐ Hard Spot / / / / /
- ☐ Combination Tool / / / / /
- ☐ Transverse Field/Triaxial / / / / /
- ☐ Other _____ / / / / /

16. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Accident?

☐ Yes ⇨ Most recent year tested: / / / / / Test pressure (psig): / / / / /

☐ No

17. Has one or more Direct Assessment been conducted on this segment?

☐ Yes, and an investigative dig was conducted at the point of the Accident ⇨ Most recent year conducted: / / / / /

☐ Yes, but the point of the Accident was not identified as a dig site ⇨ Most recent year conducted: / / / / /

☐ No

18. Has one or more non-destructive examination been conducted at the point of the Accident since January 1, 2002?

☐ Yes ☐ No

18.a. If Yes, for each examination conducted since January 1, 2002, select type of non-destructive examination and indicate most recent year the examination was conducted:

- ☐ Radiography / / / / /
- ☐ Guided Wave Ultrasonic / / / / /
- ☐ Handheld Ultrasonic Tool / / / / /
- ☐ Wet Magnetic Particle Test / / / / /
- ☐ Dry Magnetic Particle Test / / / / /
- ☐ Other _____ / / / / /

G2 - Natural Force Damage - *only one sub-cause can be picked from shaded left-hand column

<input type="checkbox"/> Earth Movement, NOT due to Heavy Rains/Floods	1. Specify: <input type="radio"/> Earthquake <input type="radio"/> Subsidence <input type="radio"/> Landslide <input type="radio"/> Other _____
<input type="checkbox"/> Heavy Rains/Floods	2. Specify: <input type="radio"/> Washout/Scouring <input type="radio"/> Flotation <input type="radio"/> Mudslide <input type="radio"/> Other _____
<input type="checkbox"/> Lightning	3. Specify: <input type="radio"/> Direct hit <input type="radio"/> Secondary impact such as resulting nearby fires
<input type="checkbox"/> Temperature	4. Specify: <input type="radio"/> Thermal Stress <input type="radio"/> Frost Heave <input type="radio"/> Frozen Components <input type="radio"/> Other _____
<input type="checkbox"/> High Winds	
<input type="checkbox"/> Other Natural Force Damage	*5. Describe: _____

Complete the following if any Natural Force Damage sub-cause is selected.

*6. Were the natural forces causing the Accident generated in conjunction with an extreme weather event? ☐ Yes ☐ No

*6.a. If Yes, specify: (select all that apply)

- ☐ Hurricane ☐ Tropical Storm ☐ Tornado
☐ Other _____

G3 – Excavation Damage - *only one **sub-cause** can be picked from shaded left-hand column

<input type="checkbox"/> Excavation Damage by Operator (First Party)	
<input type="checkbox"/> Excavation Damage by Operator's Contractor (Second Party)	
<input type="checkbox"/> Excavation Damage by Third Party	
<input type="checkbox"/> Previous Damage due to Excavation Activity	<p>Complete Questions 1-5 ONLY IF the "Item Involved in Accident" (from PART C, Question 3) is Pipe or Weld.</p> <p>1. Has one or more internal inspection tool collected data at the point of the Accident? <input type="radio"/> Yes <input type="radio"/> No</p> <p>1.a If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:</p> <p><input type="radio"/> Magnetic Flux Leakage <u> / / / / / </u></p> <p><input type="radio"/> Ultrasonic <u> / / / / / </u></p> <p><input type="radio"/> Geometry <u> / / / / / </u></p> <p><input type="radio"/> Caliper <u> / / / / / </u></p> <p><input type="radio"/> Crack <u> / / / / / </u></p> <p><input type="radio"/> Hard Spot <u> / / / / / </u></p> <p><input type="radio"/> Combination Tool <u> / / / / / </u></p> <p><input type="radio"/> Transverse Field/Triaxial <u> / / / / / </u></p> <p><input type="radio"/> Other _____ <u> / / / / / </u></p> <p>2. Do you have reason to believe that the internal inspection was completed BEFORE the damage was sustained? <input type="radio"/> Yes <input type="radio"/> No</p> <p>3. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Accident?</p> <p><input type="radio"/> Yes ➡ Most recent year tested: <u> / / / / / </u> Test pressure (psig): <u> / / / / / </u></p> <p><input type="radio"/> No</p> <p>4. Has one or more Direct Assessment been conducted on the pipeline segment?</p> <p><input type="radio"/> Yes, and an investigative dig was conducted at the point of the Accident ➡ Most recent year conducted: <u> / / / / / </u></p> <p><input type="radio"/> Yes, but the point of the Accident was not identified as a dig site ➡ Most recent year conducted: <u> / / / / / </u></p> <p><input type="radio"/> No</p> <p>5. Has one or more non-destructive examination been conducted at the point of the Accident since January 1, 2002? <input type="radio"/> Yes <input type="radio"/> No</p> <p>5.a If Yes, for each examination conducted since January 1, 2002, select type of non-destructive examination and indicate most recent year the examination was conducted:</p> <p><input type="radio"/> Radiography <u> / / / / / </u></p> <p><input type="radio"/> Guided Wave Ultrasonic <u> / / / / / </u></p> <p><input type="radio"/> Handheld Ultrasonic Tool <u> / / / / / </u></p> <p><input type="radio"/> Wet Magnetic Particle Test <u> / / / / / </u></p> <p><input type="radio"/> Dry Magnetic Particle Test <u> / / / / / </u></p> <p><input type="radio"/> Other _____ <u> / / / / / </u></p>

Complete the following if Excavation Damage by Third Party is selected as the sub-cause.

6. Did the Operator get prior notification of the excavation activity? ☐ Yes ☐ No

*6.a If Yes, Notification received from: (select all that apply) ☐ One-Call System ☐ Excavator ☐ Contractor ☐ Landowner

Complete the following mandatory CGA-DIRT Program questions if any Excavation Damage sub-cause is selected.

7. Do you want PHMSA to upload the following information to CGA-DIRT (www.cga-dirt.com)? ☐ Yes ☐ No

*8. Right-of-Way where event occurred: (select all that apply)

- ☐ Public ➡ Specify: ☐ City Street ☐ State Highway ☐ County Road ☐ Interstate Highway ☐ Other
- ☐ Private ➡ Specify: ☐ Private Landowner ☐ Private Business ☐ Private Easement
- ☐ Pipeline Property/Easement
- ☐ Power/Transmission Line
- ☐ Railroad
- ☐ Dedicated Public Utility Easement
- ☐ Federal Land
- ☐ Data not collected
- ☐ Unknown/Other

*9. Type of excavator: (select only one)

- ☐ Contractor ☐ County ☐ Developer ☐ Farmer ☐ Municipality ☐ Occupant
- ☐ Railroad ☐ State ☐ Utility ☐ Data not collected ☐ Unknown/Other

*10. Type of excavation equipment: (select only one)

- ☐ Auger ☐ Backhoe/Trackhoe ☐ Boring ☐ Drilling ☐ Directional Drilling
- ☐ Explosives ☐ Farm Equipment ☐ Grader/Scraper ☐ Hand Tools ☐ Milling Equipment
- ☐ Probing Device ☐ Trencher ☐ Vacuum Equipment ☐ Data not collected ☐ Unknown/Other

*11. Type of work performed: (select only one)

- ☐ Agriculture ☐ Cable TV ☐ Curb/Sidewalk ☐ Building Construction ☐ Building Demolition
- ☐ Drainage ☐ Driveway ☐ Electric ☐ Engineering/Surveying ☐ Fencing
- ☐ Grading ☐ Irrigation ☐ Landscaping ☐ Liquid Pipeline ☐ Milling
- ☐ Natural Gas ☐ Pole ☐ Public Transit Authority ☐ Railroad Maintenance ☐ Road Work
- ☐ Sewer (Sanitary/Storm) ☐ Site Development ☐ Steam ☐ Storm Drain/Culvert ☐ Street Light
- ☐ Telecommunications ☐ Traffic Signal ☐ Traffic Sign ☐ Water ☐ Waterway Improvement
- ☐ Data not collected ☐ Unknown/Other

*12. Was the One-Call Center notified? ☐ Yes ☐ No

*12.a If Yes, specify ticket number: / / / / / / / / / / / / / / / /

*12.b If this is a State where more than a single One-Call Center exists, list the name of the One-Call Center notified:

*13. Type of Locator: ☐ Utility Owner ☐ Contract Locator ☐ Data not collected ☐ Unknown/Other

*14. Were facility locate marks visible in the area of excavation? ☐ No ☐ Yes ☐ Data not collected ☐ Unknown/Other

*15. Were facilities marked correctly? ☐ No ☐ Yes ☐ Data not collected ☐ Unknown/Other

*16. Did the damage cause an interruption in service? ☐ No ☐ Yes ☐ Data not collected ☐ Unknown/Other

*16.a If Yes, specify duration of the interruption: / / / / / hours

(This CGA-DIRT section continued on next page with Question 17.)

*17. Description of the CGA-DIRT Root Cause (select only the one predominant first level CGA-DIRT Root Cause and then, where available as a choice, the one predominant second level CGA-DIRT Root Cause as well):

☐ One-Call Notification Practices Not Sufficient: (select only one)

- ☐ No notification made to the One-Call Center
- ☐ Notification to One-Call Center made, but not sufficient
- ☐ Wrong information provided

☐ Locating Practices Not Sufficient: (select only one)

- ☐ Facility could not be found/located
- ☐ Facility marking or location not sufficient
- ☐ Facility was not located or marked
- ☐ Incorrect facility records/maps

☐ Excavation Practices Not Sufficient: (select only one)

- ☐ Excavation practices not sufficient (other)
- ☐ Failure to maintain clearance
- ☐ Failure to maintain the marks
- ☐ Failure to support exposed facilities
- ☐ Failure to use hand tools where required
- ☐ Failure to verify location by test-hole (pot-holing)
- ☐ Improper backfilling

☐ One-Call Notification Center Error

☐ Abandoned Facility

☐ Deteriorated Facility

☐ Previous Damage

☐ Data Not Collected

☐ Other / None of the Above (explain)

G4 - Other Outside Force Damage - *only one **sub-cause** can be picked from shaded left-hand column

<input type="checkbox"/> Nearby Industrial, Man-made, or Other Fire/Explosion as Primary Cause of Accident																			
<input type="checkbox"/> Damage by Car, Truck, or Other Motorized Vehicle/Equipment NOT Engaged in Excavation	1. Vehicle/Equipment operated by: (<i>select only one</i>) <input type="radio"/> Operator <input type="radio"/> Operator's Contractor <input type="radio"/> Third Party																		
<input type="checkbox"/> Damage by Boats, Barges, Drilling Rigs, or Other Maritime Equipment or Vessels Set Adrift or Which Have Otherwise Lost Their Mooring	2. Select one or more of the following IF an extreme weather event was a factor: <input type="radio"/> Hurricane <input type="radio"/> Tropical Storm <input type="radio"/> Tornado <input type="radio"/> Heavy Rains/Flood <input type="radio"/> Other _____																		
<input type="checkbox"/> Routine or Normal Fishing or Other Maritime Activity NOT Engaged in Excavation																			
<input type="checkbox"/> Electrical Arcing from Other Equipment or Facility																			
<input type="checkbox"/> Previous Mechanical Damage NOT Related to Excavation	<p>Complete Questions 3-7 ONLY IF the "Item Involved in Accident" (from PART C, Question 3) is Pipe or Weld.</p> <p>3. Has one or more internal inspection tool collected data at the point of the Accident? <input type="radio"/> Yes <input type="radio"/> No</p> <p>3.a If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:</p> <table style="width: 100%;"> <tr><td><input type="radio"/> Magnetic Flux Leakage</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Ultrasonic</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Geometry</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Caliper</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Crack</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Hard Spot</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Combination Tool</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Transverse Field/Triaxial</td><td>/ / / / /</td></tr> <tr><td><input type="radio"/> Other _____</td><td>/ / / / /</td></tr> </table> <p>4. Do you have reason to believe that the internal inspection was completed BEFORE the damage was sustained? <input type="radio"/> Yes <input type="radio"/> No</p> <p>5. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Accident?</p> <p><input type="radio"/> Yes ⇒ Most recent year tested: / / / / / Test pressure (psig): / / / , / / / /</p> <p><input type="radio"/> No</p> <p>6. Has one or more Direct Assessment been conducted on the pipeline segment?</p> <p><input type="radio"/> Yes, and an investigative dig was conducted at the point of the Accident ⇒ Most recent year conducted: / / / / /</p> <p><input type="radio"/> Yes, but the point of the Accident was not identified as a dig site ⇒ Most recent year conducted: / / / / /</p> <p><input type="radio"/> No</p> <p>(This section continued on next page with Question 7.)</p>	<input type="radio"/> Magnetic Flux Leakage	/ / / / /	<input type="radio"/> Ultrasonic	/ / / / /	<input type="radio"/> Geometry	/ / / / /	<input type="radio"/> Caliper	/ / / / /	<input type="radio"/> Crack	/ / / / /	<input type="radio"/> Hard Spot	/ / / / /	<input type="radio"/> Combination Tool	/ / / / /	<input type="radio"/> Transverse Field/Triaxial	/ / / / /	<input type="radio"/> Other _____	/ / / / /
<input type="radio"/> Magnetic Flux Leakage	/ / / / /																		
<input type="radio"/> Ultrasonic	/ / / / /																		
<input type="radio"/> Geometry	/ / / / /																		
<input type="radio"/> Caliper	/ / / / /																		
<input type="radio"/> Crack	/ / / / /																		
<input type="radio"/> Hard Spot	/ / / / /																		
<input type="radio"/> Combination Tool	/ / / / /																		
<input type="radio"/> Transverse Field/Triaxial	/ / / / /																		
<input type="radio"/> Other _____	/ / / / /																		

G5 - Material Failure of Pipe or Weld	Use this section to report material failures ONLY IF the "Item Involved in Accident" (from PART C, Question 3) is "Pipe" or "Weld." *Only one sub-cause can be picked from shaded left-hand column
--	---

1. The sub-cause selected below is based on the following: *(select all that apply)*

☐ Field Examination
 ☐ Determined by Metallurgical Analysis
 ☐ Other Analysis _____
☐ Sub-cause is Tentative or Suspected; Still Under Investigation *(Supplemental Report required)*

<input type="checkbox"/> Construction-, Installation-, or Fabrication-related	2. List contributing factors: <i>(select all that apply)</i> <input type="checkbox"/> Fatigue- or Vibration-related: <input type="radio"/> Mechanically-induced prior to installation (such as during transport of pipe) <input type="radio"/> Mechanical Vibration <input type="radio"/> Pressure-related <input type="radio"/> Thermal <input type="radio"/> Other _____ <input type="checkbox"/> Mechanical Stress <input type="checkbox"/> Other _____
<input type="checkbox"/> Original Manufacturing-related (NOT girth weld or other welds formed in the field)	
<input type="checkbox"/> Environmental Cracking-related	3. Specify: <input type="radio"/> Stress Corrosion Cracking <input type="radio"/> Sulfide Stress Cracking <input type="radio"/> Hydrogen Stress Cracking <input type="radio"/> Other _____

Complete the following if any Material Failure of Pipe or Weld sub-cause is selected.

*4. Additional factors: *(select all that apply)*
☐ Dent
☐ Gouge
☐ Pipe Bend
☐ Arc Burn
☐ Crack
☐ Lack of Fusion
☐ Lamination
☐ Buckle
☐ Wrinkle
☐ Misalignment
☐ Burnt Steel
☐ Other _____

*5. Has one or more internal inspection tool collected data at the point of the Accident? ☐ Yes ☐ No

*5.a If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:

<input type="radio"/> Magnetic Flux Leakage Tool	____/____/____/____/____/
<input type="radio"/> Ultrasonic	____/____/____/____/____/
<input type="radio"/> Geometry	____/____/____/____/____/
<input type="radio"/> Caliper	____/____/____/____/____/
<input type="radio"/> Crack	____/____/____/____/____/
<input type="radio"/> Hard Spot	____/____/____/____/____/
<input type="radio"/> Combination Tool	____/____/____/____/____/
<input type="radio"/> Transverse Field/Triaxial	____/____/____/____/____/
<input type="radio"/> Other _____	____/____/____/____/____/

*6. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Accident?
☐ Yes ⇒ Most recent year tested: ____/____/____/____/____/ Test pressure (psig): ____/____/____/____/____/

☐ No

*7. Has one or more Direct Assessment been conducted on the pipeline segment?
☐ Yes, and an investigative dig was conducted at the point of the Accident ⇒ Most recent year conducted: ____/____/____/____/____/

☐ Yes, but the point of the Accident was not identified as a dig site ⇒ Most recent year conducted: ____/____/____/____/____/

☐ No

*8. Has one or more non-destructive examination(s) been conducted at the point of the Accident since January 1, 2002?
☐ Yes ☐ No

*8.a If Yes, for each examination conducted since January 1, 2002, select type of non-destructive examination and indicate most recent year the examination was conducted:

<input type="radio"/> Radiography	____/____/____/____/____/
<input type="radio"/> Guided Wave Ultrasonic	____/____/____/____/____/
<input type="radio"/> Handheld Ultrasonic Tool	____/____/____/____/____/
<input type="radio"/> Wet Magnetic Particle Test	____/____/____/____/____/
<input type="radio"/> Dry Magnetic Particle Test	____/____/____/____/____/
<input type="radio"/> Other _____	____/____/____/____/____/

G6 - Equipment Failure - *only one **sub-cause** can be picked from shaded left-hand column

<input type="checkbox"/> Malfunction of Control/Relief Equipment	1. Specify: <i>(select all that apply)</i> <div style="display: flex; justify-content: space-between;"> <div> <input type="radio"/> Control Valve <input type="radio"/> Communications <input type="radio"/> Relief Valve <input type="radio"/> ESD System Failure <input type="radio"/> Other _____ </div> <div> <input type="radio"/> Instrumentation <input type="radio"/> Block Valve <input type="radio"/> Power Failure </div> <div> <input type="radio"/> SCADA <input type="radio"/> Check Valve <input type="radio"/> Stopple/Control Fitting </div> </div>
<input type="checkbox"/> Pump or Pump-related Equipment	2. Specify: <input type="radio"/> Seal/Packing Failure <input type="radio"/> Body Failure <input type="radio"/> Crack in Body <input type="radio"/> Appurtenance Failure <input type="radio"/> Other _____
<input type="checkbox"/> Threaded Connection/Coupling Failure	3. Specify: <input type="radio"/> Pipe Nipple <input type="radio"/> Valve Threads <input type="radio"/> Mechanical Coupling <input type="radio"/> Threaded Pipe Collar <input type="radio"/> Threaded Fitting <input type="radio"/> Other _____
<input type="checkbox"/> Non-threaded Connection Failure	4. Specify: <input type="radio"/> O-Ring <input type="radio"/> Gasket <input type="radio"/> Seal (NOT pump seal) or Packing <input type="radio"/> Other _____
<input type="checkbox"/> Defective or Loose Tubing or Fitting	
<input type="checkbox"/> Failure of Equipment Body (except Pump), Tank Plate, or other Material	
<input type="checkbox"/> Other Equipment Failure	*5. Describe: _____ _____

Complete the following if any Equipment Failure sub-cause is selected.

*6. Additional factors that contributed to the equipment failure: *(select all that apply)*

- ☐ Excessive vibration
- ☐ Overpressurization
- ☐ No support or loss of support
- ☐ Manufacturing defect
- ☐ Loss of electricity
- ☐ Improper installation
- ☐ Mismatched items (different manufacturer for tubing and tubing fittings)
- ☐ Dissimilar metals
- ☐ Breakdown of soft goods due to compatibility issues with transported commodity
- ☐ Valve vault or valve can contributed to the release
- ☐ Alarm/status failure
- ☐ Misalignment
- ☐ Thermal stress
- ☐ Other _____

G7 - Incorrect Operation - *only one sub-cause can be picked from shaded left-hand column

<input type="checkbox"/> Damage by Operator or Operator's Contractor NOT Related to Excavation and NOT due to Motorized Vehicle/Equipment Damage	
<input type="checkbox"/> Tank, Vessel, or Sump/Separator Allowed or Caused to Overfill or Overflow	1. Specify: <input type="radio"/> Valve misalignment <input type="radio"/> Incorrect reference data/calculation <input type="radio"/> Miscommunication <input type="radio"/> Inadequate monitoring <input type="radio"/> Other _____
<input type="checkbox"/> Valve Left or Placed in Wrong Position, but NOT Resulting in a Tank, Vessel, or Sump/Separator Overflow or Facility Overpressure	
<input type="checkbox"/> Pipeline or Equipment Overpressured	
<input type="checkbox"/> Equipment Not Installed Properly	
<input type="checkbox"/> Wrong Equipment Specified or Installed	
<input type="checkbox"/> Other Incorrect Operation	*2. Describe: _____

Complete the following if any Incorrect Operation sub-cause is selected.

*3. Was this Accident related to: *(select all that apply)*

- ☐ Inadequate procedure
- ☐ No procedure established
- ☐ Failure to follow procedure
- ☐ Other: _____

*4. What category type was the activity that caused the Accident:

- ☐ Construction
- ☐ Commissioning
- ☐ Decommissioning
- ☐ Right-of-Way activities
- ☐ Routine maintenance
- ☐ Other maintenance
- ☐ Normal operating conditions
- ☐ Non-routine operating conditions (abnormal operations or emergencies)

*5. Was the task(s) that led to the Accident identified as a covered task in your Operator Qualification Program? ☐ Yes ☐ No

*5.a If Yes, were the individuals performing the task(s) qualified for the task(s)?

- ☐ Yes, they were qualified for the task(s)
- ☐ No, but they were performing the task(s) under the direction and observation of a qualified individual
- ☐ No, they were not qualified for the task(s) nor were they performing the task(s) under the direction and observation of a qualified individual

G8 – Other Accident Cause - *only one sub-cause can be picked from shaded left-hand column

<input type="checkbox"/> Miscellaneous	*1. Describe: _____ _____
<input type="checkbox"/> Unknown	*2. Specify: <input type="radio"/> Investigation complete, cause of Accident unknown <input type="radio"/> Still under investigation, cause of Accident to be determined* (*Supplemental Report required)

(Attach additional sheets as necessary)

(Attach additional sheets as necessary)

*Preparer's Name (type or print)

Preparer's Telephone Number

Preparer's Title (type or print)

Preparer's E-mail Address

Preparer's Facsimile Number

Authorized Signature

*Date

Authorized Signature Telephone Number

*Authorized Signature's Name (type or print)

Authorized Signature's Title (type or print)

Authorized Signature's E-mail Address

Texas

NOTE: In addition to the Texas reporting criteria below, **ALL** releases should be **IMMEDIATELY REPORTED** to the regional HES Environmental Specialist. Any release resulting in greater than 5,000 lbs of VOC requires 24-hour notification to the state. [Texas Administrative Code, Title 30, Section 101.201]

Crude Oil Spills					
When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
<p>Reportable Quantities:</p> <p>a)For spills or discharges onto land: <u>210 gallons (5 bbl)</u></p> <p>b)For spills or discharges directly into water in the state: <u>a quantity sufficient to create a sheen</u></p>	<p>Inland Crude Spills: Texas Railroad Commission – Oil & Gas Division (see appendix for numbers)</p> <p>Crude Spills Impacting Coastal Waters: Texas General Land Office (GLO) (800) 832-8224 (CHEMTEL, 24-Hour)</p>	<p>1) Company/operator name; 2) Location of leak or incident; 3) Time and date of accident/incident; 4) Fatalities and/or personal injuries; 5) Phone number of operator; 6) Other significant facts relevant to the accident/incident.</p>	<p>Complete and send in the TXRRC – Division of Oil & Gas “Crude Oil, Gas Well Liquids, or Associated Products Loss Report”</p> <p>(see appendix for form)</p>	<p>See appendix for mailing addresses</p>	<p>(Texas Administrative Code, Title 30,Section 327.4(b))</p>

Texas

Petroleum Product and Used Oil

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
<p align="center">Reportable Quantities:</p> <p align="center">a) For spills or discharges onto land: <u>25 gallons</u></p> <p align="center">b)For spills or discharges to land from PST exempted facilities: <u>210 gallons (5 barrels)</u></p> <p align="center">c)For spills or discharges directly into water in the state: <u>quantity sufficient to create a sheen</u></p>					(Texas Administrative Code, Title 30,Section 327.4(b))
<p><u>Report Immediately (within 1 hour)</u> any actual or threatened spill or release into the environment (use the RQ guidelines above)</p>	<p>Texas Commission on Environmental Quality (800) 832-8224 (CHEMTEL, 24-Hour)</p> <p>OR TCEQ Regional Office (see appendix)</p>	<p>The spill report shall include:</p> <p>1)The substance and quantity actually discharged or potentially dischargeable and the rate of discharge;</p> <p>2)The time, location (via latitude and longitude, N.A.D. 27 or N.A.D. 83, or by state plane coordinates indicating zone or by Universal Transverse Mercator coordinates, if known), and the apparent cause of the actual or potential discharge;</p> <p>3)The size of the area actually impacted by the discharge and the area potentially impacted and whether or not any environmentally sensitive areas will be affected;</p> <p>4)The nature of any response actions undertaken and the identity of the person or discharge cleanup organization engaged in response activities;</p> <p>5)The name and title of the responsible person, the person in charge, and the person reporting the discharge;</p> <p>6)The manner in which the responsible person and the facility or vessel involved in the actual or threatened discharge may be contacted.</p>	<p>Within 60 days of the incident, file a written report with the appropriate TCEQ regional office. The report shall contain the following information:</p> <p>1)Incident date;</p> <p>2)Amount of oil spilled;</p> <p>3)Product spilled;</p> <p>4)Areas that were impacted by the spill;</p> <p>5)Description of the incident;</p> <p>6)Summary of response activity. A description of the following actions which will be taken to prevent spills of a similar nature including their effective implementation date:</p> <p>a) Conducting an analysis of the cause of the unauthorized discharge.</p> <p>b)Training to be implemented</p> <p>c)Equipment operation and maintenance</p> <p>d)Revised procedures</p> <p>e)Revised inspection schedules</p> <p>f)Organizational changes</p>	<p>Mail to appropriate TCEQ regional office (see appendix)</p>	<p>Texas Administrative Code, Title 31, Section 19.32</p>
<p>If an unauthorized discharge threatens to damage or pollute property other than that of the owner or operator or responsible person...</p>	<p>...the person in charge and the responsible person <u>MUST</u> make reasonable efforts to notify the owners of property threatened by the discharge in addition to TCEQ</p>				
<p>If the discharge immediately threatens public health, safety, or welfare...</p>	<p>...the person in charge and the responsible person <u>MUST</u> notify the appropriate local health, fire, and law enforcement authorities (911) in addition to TCEQ</p>				

Texas

Pipelines

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
For All Pipelines:					
<u>Immediately Report</u> fires, leaks, and lightening strikes to all pipelines or associated tankage	<u>For Crude Releases:</u> Railroad Commission of Texas Oil and Gas Division District Office See Appendix for District boundaries and phone numbers <u>For Product Releases:</u> Texas Commission on Environmental Quality (800) 832-8224 (24 HR) OR TCEQ Regional Office (See Appendix for Regional boundaries and phone numbers)	1) Company/operator name 2) Location of the leak or incident 3) Time and date of the accident/incident 4) Fatalities and/or personal injuries; 5) Phone number of the operator Other significant facts relevant to the accident incident.	Follow with a letter and/or Texas Form Interim H-8. Each pipeline shall report in writing to the Commission, by the 15th day of each calendar month, the estimated amount of oil loss by fire or leakage from its tanks and pipelines for the preceding month, the estimated amount of oil loss from its tanks and pipelines for the preceding month. The letter should include the following: 1) Location to the well/tank/receptacle/line break, given by county, survey, and property; 2) Specify what steps have been taken or are in progress to remedy the situation reported; 3) Detail the quantity (estimation is OK) of oil/gas/geothermal resources lost/destroyed/permited to escape.	RRC Oil and Gas Division Railroad Commission of Texas, Oil and Gas Division, 1701 North Congress PO Box 12967 Capital Station, Austin TX 78711-2967	16TAC 3.20 16TAC 3.71
<u>Immediately Report</u> any pipeline or pipeline tank incident that involves a release of greater than 5 bbls					16TAC 3.20 16TAC 3.71
<u>Immediately Report</u> any pipeline or pipeline tank incidents that involve a release of crude oil into any river, lake, or stream			Within 30 days of discovery, submit Texas Form H-8 to the Commission.	RRC Oil and Gas Division Railroad Commission of Texas, Oil and Gas Division, 1701 North Congress PO Box 12967 Capital Station, Austin TX 78711-2967	16TAC 3.20 16TAC 3.71
Any third party damage related release or damage without a release	Railroad Commission of Texas No Telephonic Report. Report online to the TDRF- Texas Damage Reporting Form		Within 10 days of discovery of the damage incident or the operator's knowledge of the damage incident, the operator shall submit the information to the Commission through TDRF: http://www.rrc.state.tx.us/formpr/index.html		16 TAC 18.11

Texas

For Part 195 Regulated Pipelines:

<p><u>At the earliest practicable moment following discovery of a release (within 2 hours)</u> which results in:</p> <p>1) Death or injury requiring in patient hospitalization, 2) A fire or explosion, 3) Causes property damage including cost of cleanup, recovery, damage, and value of lost product greater than \$50,000, 4) Pollutes any stream, river, reservoir or other similar body of water or shoreline, 5) Is significant in the judgment of the operator (such as media coverage)</p>	<p>For Interstate Pipelines:</p> <p>NRC (800) 424-8802</p>	<p><u>NRC</u> 1)Name and address of operator, 2)Name and telephone number of reporter, 3)The location of the failure, 4)The time of the failure, 5)The fatalities and personal injuries, if any 6)All significant facts know by the operator that are relevant to the cause of the failure or the extent of the damages</p>	<p><u>PHMSA (U.S. DOT)</u></p> <p>As soon as practicable, but not later than 30 days after discovery of the accident file an accident report on DOT Form 7000-1. A supplemental report is required to be filed within 30days of receiving any changes of information from the original report. Written reports are required for any releases greater than 5 gallons even if they were not telephonically reportable, except that no report is required for spills less than 5 bbls resulting from a pipeline line maintenance activity if it is not otherwise reportable, does not pollute water, is confined to company property or ROW and is cleaned up promptly.</p>	<p><u>PHMSA (U.S. DOT)</u></p> <p>Information Resources Manager, Office of Pipeline Safety, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, Room 7128, 400 Seventh Street, SW Washington, D.C. 20590</p>	<p>49CFR 195.50 49CFR 195.52 49CFR 195.54</p>
	<p>For Intrastate Pipelines:</p> <p>NRC (800) 424-8802 and</p> <p>Railroad Commission of Texas –Safety Division (512) 463-6788</p>	<p><u>RRC-Safety Division</u> 1)company/operator name, 2)Location of leak or incident, 3)Time and date of accident/incident, 4)Fatalities and/or personal injuries, 5) Phone number of operator 6) Other significant facts relevant to the accident or incident.</p>	<p><u>RRC Safety Division</u></p> <p>Within 30 days of discovery of the incident, submit Form H-8 to the Oil and Gas Division of the Commission. In situations specified in 49 CFR 195 (see above), the operator shall also file duplicate copies of the required Department of Transportation form with the Division.</p>	<p><u>RRC Safety Division</u></p> <p>Railroad Commission of Texas, Safety Division, 1701 North Congress PO Box 12967 Capital Station, Austin TX 78711-2967</p>	<p>16 TAC 8.301</p>

Texas

Petroleum Spills from non-DOT Tanks

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
Report petroleum releases of greater than 25 gallons <u>Within 24 hours</u>	Texas Commission on Environmental Quality (800) 832-8224 (24-Hour) OR TCEQ Regional Office (see appendix)	The spill report shall include: 1)Time of the spill; 2)Identity of the material spilled; 3)Approximate quantity spilled; 4)Location and source of the spill; 5)Cause and circumstances of the spill; 6)Existing or potential hazards (fire, explosion, etc.), if any; 7)Personal injuries or causalities, if any; 8)Corrective action being taken and an approximate timetable to control, contain, and clean up spill; 9)Name(s) and telephone number(s) of individual(s) who discovered and/or reported the spill; 10)Other unique or unusual circumstances	Within 20 days after incident, submit a <i>Release Determination Report Form</i> (copy provided following this chart)	Mail to appropriate TCEQ regional office (see appendix)	Texas Administrative Code, Title 30, Section 327.3 & Section 334.129
<u>Immediately Report</u> petroleum releases of greater than 25 gallons <u>ONLY if it CANNOT be cleaned up within 24 hours</u>					

Hazardous Waste

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
FOR WASTE GENERATORS THAT GENERATE BETWEEN 100kg and 1,000kg OF HAZ WASTE PER MONTH: <u>Immediately</u> report any releases that could threaten human health or the environment outside the facility, or when the release has reached surface water	National Response Center (800) 424-8802 Texas Commission on Environmental Quality (800) 832-8224 (24-Hour) OR TCEQ Regional Office (see appendix)	1)Name, address and EPA ID Number of generator; 2)Date, time, type of incident; 3)Quantity and type of waste involved; 4)The extent of injuries, if any; 5)The estimated quantity and disposition of recovered materials, if any	A written report may be REQUESTED or REQUIRED by the TCEQ. Call the notification numbers to inquire if a written follow-up report is required and if so, the content of the report and mailing address.	Mail to appropriate TCEQ regional office (see appendix)	Texas Administrative Code, Title 30, Section 335.69(f)(5)(D)(iii)
FOR WASTE GENERATORS THAT GENERATE 1,000kg OR MORE OF HAZ WASTE PER MONTH: <u>Immediately</u> report any releases that could threaten human health or the environment outside the facility, or when the release has reached surface water	***NOTE: If facility determines that evacuation of local areas may be advisable, also immediately notify appropriate local authorities***	1)Name and telephone number of reporter; 2)Name and address of facility; 3)Time and type of incident; 4)Name and quantity of materials involved, and the estimated quantity and disposition of any recovered materials; 5)The extent of injuries, if any; 6)Possible hazards to human health or the environment, outside the facility	A written report of the incident must be submitted to the TCEQ <u>within 15 days</u> , addressing the items from the telephone notification, and additionally describing the quantity and disposition of any recovered material.		Texas Administrative Code, Title 30, Section 335.69(a)(4), referring to 40 CFR 265.56, 335.113

Texas

Cleanup of Soil Contaminated by a Crude Oil Spill

(Citation: Texas Administrative Code, Title 16, Part 1, Chapter 3, Rule §3.91)

(e) Reporting requirements.

- (1) **Crude oil spills over five barrels.** For each spill exceeding five barrels of crude oil, the responsible operator must comply with the notification and reporting requirements of §3.20 of this title (relating to Notification of Fire Breaks, Leaks, or Blow-outs) and submit a report on a Form H-8 to the appropriate district office. The following information must be included:
 - (A) area (square feet), maximum depth (feet), and volume (cubic yards) of soil contaminated with greater than 1.0% by weight total petroleum hydrocarbons;
 - (B) a signed statement that all soil containing over 1.0% by weight total petroleum hydrocarbons was brought to the surface for remediation or disposal;
 - (C) a signed statement that all soil containing over 5.0% by weight total petroleum hydrocarbons has been mixed in place to 5.0% by weight or less total petroleum hydrocarbons or has been removed to an approved disposal site or to a secure interim storage location;
 - (D) a detailed description of the disposal or remediation method used or planned to be used for cleanup of the site;
 - (E) the estimated date of completion of site cleanup.
- (2) **Crude oil spills over 25 barrels.** For each spill exceeding 25 barrels of crude oil, in addition to the report required in paragraph (1) of this subsection, the operator must submit to the appropriate district office a final report upon completion of the cleanup of the site. Analyses of samples representative of the spill site must be submitted to verify that the final cleanup concentration has been achieved.
- (3) **Crude oil spills of five barrels or less.** Spills into the soil of five barrels or less of crude oil must be remediated to these standards, but are not required to be reported to the commission. All spills of crude oil into water must be reported to the commission.

TEXAS RAILROAD COMMISSION DISTRICT OFFICES

District 10

Lindsay Patterson, Director
P.O. Box 941
Pampa, TX 79066-0941
(806) 665-1653
Fax: (806) 665-4217

Districts 8 & 8A

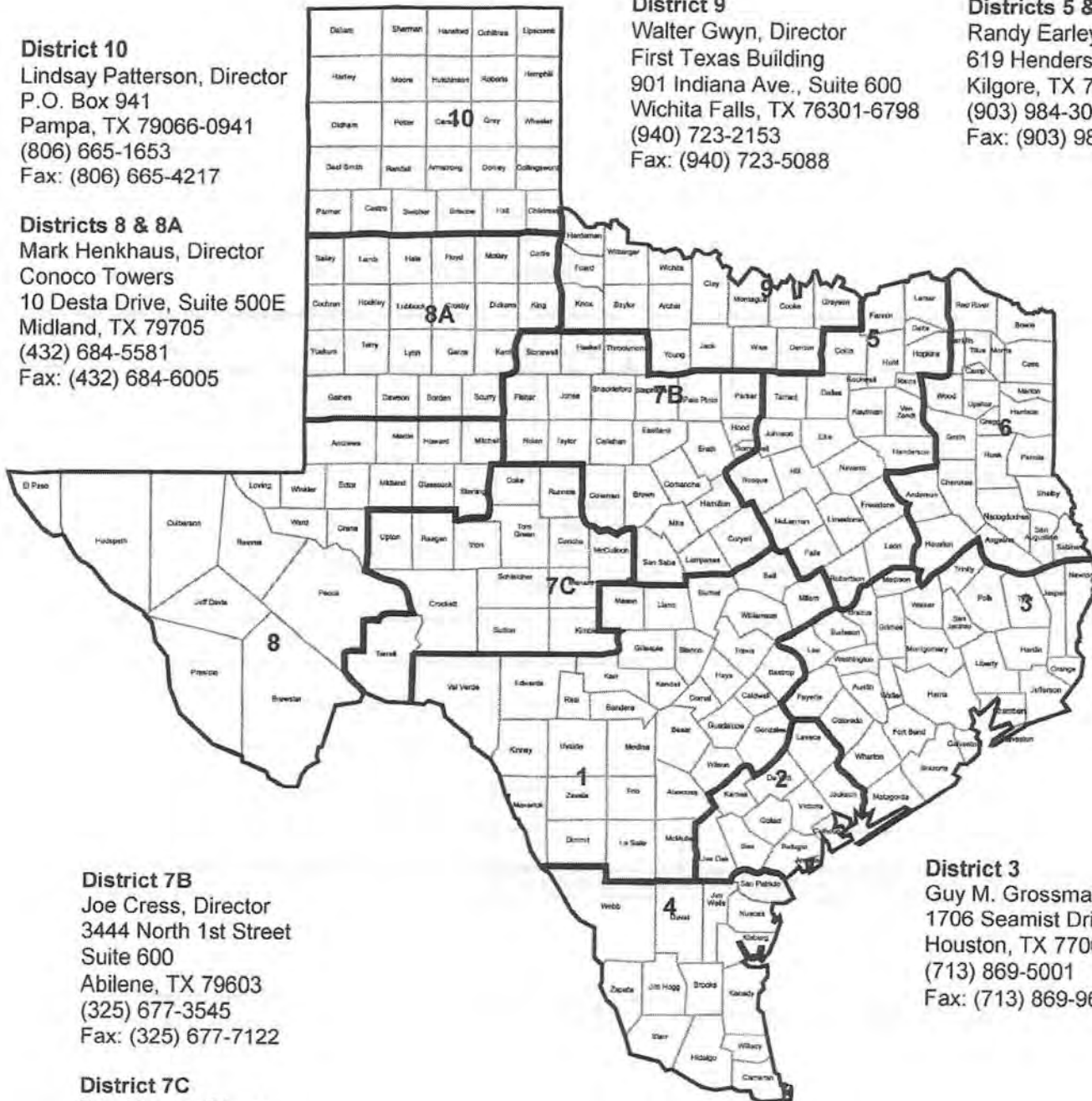
Mark Henkhaus, Director
Conoco Towers
10 Desta Drive, Suite 500E
Midland, TX 79705
(432) 684-5581
Fax: (432) 684-6005

District 9

Walter Gwyn, Director
First Texas Building
901 Indiana Ave., Suite 600
Wichita Falls, TX 76301-6798
(940) 723-2153
Fax: (940) 723-5088

Districts 5 & 6

Randy Earley, Director
619 Henderson Blvd.
Kilgore, TX 75662-5998
(903) 984-3026
Fax: (903) 983-3413



District 7B

Joe Cress, Director
3444 North 1st Street
Suite 600
Abilene, TX 79603
(325) 677-3545
Fax: (325) 677-7122

District 7C

Don Horner, Director
622 S. Oakes Street, Suite J
San Angelo, TX 76903-2141
(325) 657-7450
Fax: (325) 657-7455

District 4

Fermin Munoz, Director
P.O. Box 10307
Corpus Christi, TX 78460-0307
(361) 242-3113
Fax: (361) 242-9613

District 3

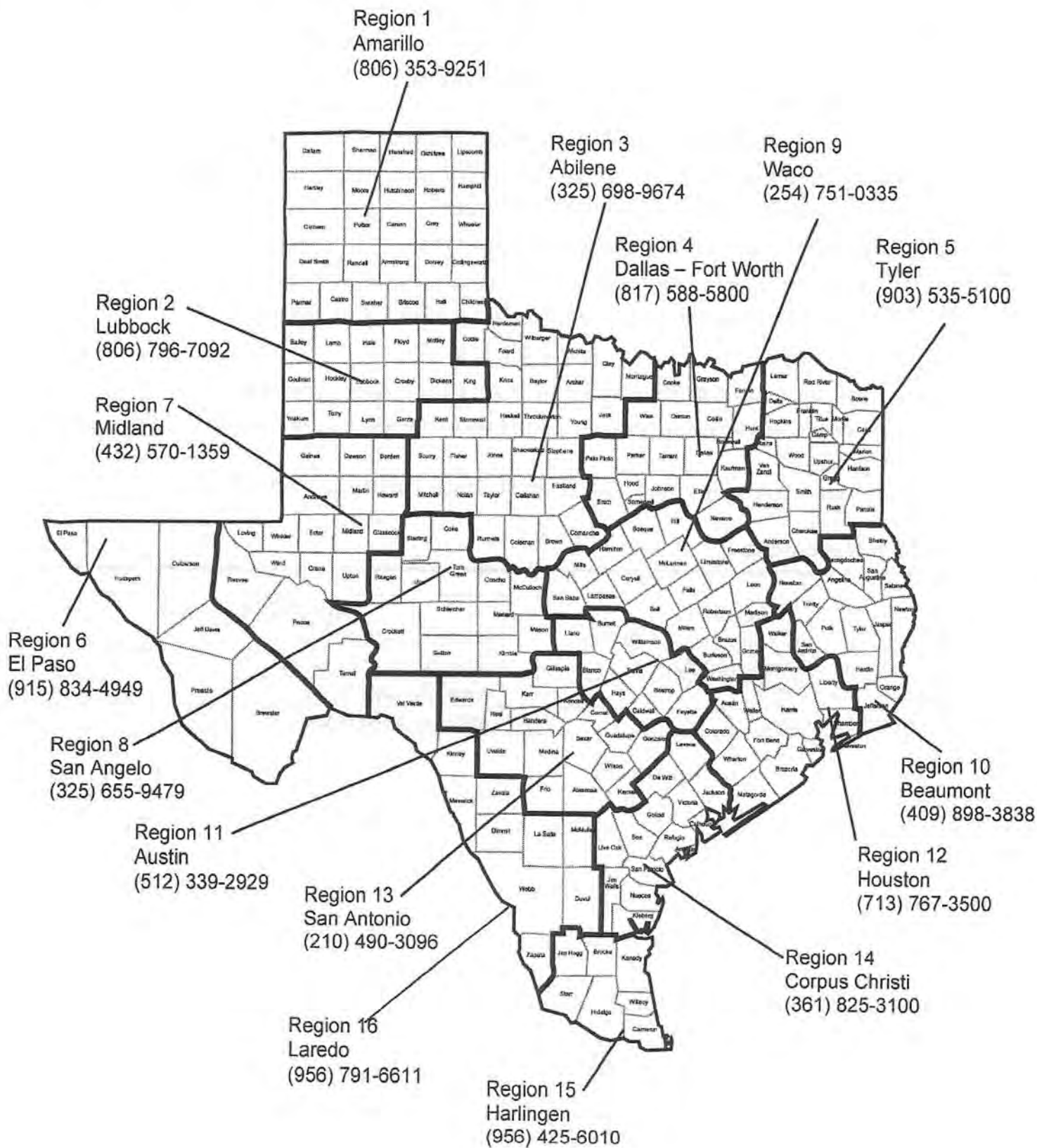
Guy M. Grossman, Director
1706 Seamist Drive, Suite 501
Houston, TX 77008-3135
(713) 869-5001
Fax: (713) 869-9621

Districts 1 & 2

Tom Melville, Director
115 East Travis, Suite 1610
San Antonio, TX 78205-1689
(210) 227-1313
Fax: (210) 227-4822

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

REGIONAL OFFICES



Oil					
When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
<p>Report within 1 hour any oil spills that may result in emergency conditions (emergency condition is any condition that could reasonable be expected to endanger the health and safety of the public; cause significant adverse impact to the land, water or air environment; or cause severe damage to property)</p>	<p>Local 911</p> <p>Louisiana Department of Public Safety (225) 925-6595 (24-hour) (877) 925-6595 (24-hour)</p>	<p>1)Name of person making the notification and telephone number where any return calls from response agencies may be placed; 2)In the event of an incident involving transport, provide the name and address of the transporter and generator; 3)Name and location of the facility or site where the unauthorized discharge is imminent or has occurred, using common landmarks; 4)Date and time the incident began and ended, or estimated time the discharge may continue; 5)Extent of any injuries and identification of any personnel hazards that response agencies may face; 6)Common or scientific name, U.S. Department of Transportation hazard classification, and best estimate of amounts of any or all discharged pollutants; 7)Brief description of the incident sufficient to allow response agencies to decide on the level and extent of response activity</p>	<p>A written report of the incident must be submitted within 7 days to the LEPC, State Police, and LDEQ, unless the indicated otherwise. The submittal date will be the date of the postmark (if U.S. mailed) or the date of receipt (if hand-delivered, faxed or couriered).</p> <p>***See page 5 of LA requirements for details of written report***</p>	<p>Louisiana Department of Environmental Quality - Office of Environmental Compliance P.O. Box 4312 Baton Rouge, LA 70821-4312 ATTN: ERSD-SPOC "Unauthorized Discharge Notification Report"</p> <p>Louisiana Oil Spill Coordinator's Office Department of Public Safety and Corrections P.O. Box 66614 Baton Rouge, LA 70896</p>	<p>Louisiana Administrative Code: LAC33:I.3915, LAC33:I.3917, LAC33:I.3923, LAC33:I.3925, LAC33:V.10111</p>
<p>Report within 24 hours any oil spills that no not result in emergency conditions (emergency condition is any condition that could reasonable be expected to endanger the health and safety of the public; cause significant adverse impact to the land, water or air environment; or cause severe damage to property)</p>	<p>Louisiana Department of Environmental Quality - Office of Environmental Compliance (225) 219-3640 or (225) 219-3710 (8 to 4:30) (225) 219-3708 (Fax) (225) 342-1234 (24-hour) (888) 763-5424 (Within Louisiana)</p> <p>Louisiana Oil Spill Coordinator's Office (225) 925-6606 (8am to 5pm) (225) 925-7068 (Fax)</p>				

Pipeline Releases

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
<p>Report at the earliest practicable moment following discovery of any pipeline failures that result in:</p> <ol style="list-style-type: none"> 1. An explosion or fire not intentionally set by the operator; 2. A release of 5 barrels or more; 3. A release of less than 5 barrels ONLY IF the release left the company property or right-of-way; 4. A death of any person; 5. Bodily harm to any person resulting in <ol style="list-style-type: none"> a)loss of consciousness, b)necessity to carry the person from the scene, c)necessity for medical treatment, or d)disability which prevents the discharge of normal duties beyond the day of the accident 6. Property damage > \$50,000, including cleanup, recovery, lost product and property damage 7. Pollution to any body of water that violates applicable water quality standards, causes discoloration, or deposits sludge beneath the surface or on shorelines 	<p>Louisiana Department of Natural Resources - Office of Conservation (225) 342-5540 (225) 342-3705 (Fax) or Pipeline Incidents (225) 342-5505 (24-hour)</p>	<ol style="list-style-type: none"> 1)Name and address of operator; 2)Name and telephone of reporter; 3)Location of the failure; 4)Time of the failure; 5)Fatalities and person injuries, if any; 6)All other significant facts known by the operator that are relevant to the cause of the failure or extent of the damages. 	<p>A written report of the incident must be submitted as soon as practicable, but not later than 30 days after discovery</p>	<p>Louisiana Department of Natural Resources - Office of Conservation P.O. Box 94275 Baton Rouge, LA 70804-9275</p>	<p>Louisiana Administrative Code: LAC33:V.30125</p>
<p>Any release into waters of the state that is expected to significantly impact downstream potable or industrial water usage: Report within 1 hour</p>	<p>Louisiana Department of Environmental Quality - Office of Environmental Compliance (225) 219-3640 or (225) 219-3710 (8 to 4:30) (225) 219-3708 (Fax) (225) 342-1234 (24-hour)</p>		<p>A written report may be REQUESTED or REQUIRED by the DEQ. Call the notification numbers to inquire if a written follow-up report is required, and if so, the content of the report.</p>		

Tank Leaks					
When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
Underground storage tank release: Report ASAP	Louisiana Department of Environmental Quality - Office of Environmental Compliance (225) 219-3640 or (225) 219-3710 (8 to 4:30) (225) 219-3708 (Fax) (225) 342-1234 (24-hour)	1)Name of person making the notification and telephone number where any return calls from response agencies may be placed; 2)In the event of an incident involving transport, provide the name and address of the transporter and generator; 3)Name and location of the facility or site where the unauthorized discharge is imminent or has occurred, using common landmarks; 4)Date and time the incident began and ended, or estimated time the discharge may continue; 5)Extent of any injuries and identification of any personnel hazards that response agencies may face; 6)Common or scientific name, U.S. Department of Transportation hazard classification, and best estimate of amounts of any or all discharged pollutants; 7)Brief description of the incident sufficient to allow response agencies to decide on the level and extent of response activity	A written report of the incident must be submitted within 7 days to the LEPC, State Police, and LDEQ , unless the indicated otherwise. The submittal date will be the date of the postmark (if U.S. mailed) or the date of receipt (if hand-delivered, faxed or couriered). ***See page 5 of LA requirements for details of written report***	Louisiana Department of Environmental Quality - Office of Environmental Compliance P.O. Box 4312 Baton Rouge, LA 70821-4312 ATTN: ERSD-SPOC "Unauthorized Discharge Notification Report"	Louisiana Administrative Code: LAC33:XI.707, LAC33:XI.713
Petroleum tank spills/overfills >42 gallons: Report within 24 hours					
Petroleum tank spills/overfills that cause a sheen on nearby surface waters: Report within 24 hours					
Petroleum tank spills/overfills that cause an emergency: Report Immediately	Local 911 Louisiana Department of Public Safety (225) 925-6595 (24-hour) (877) 925-6595 (24-hour)				Louisiana Administrative Code: LAC33:I.3915, LAC33:I.3917, LAC33:I.3923, LAC33:I.3925

Hazardous Waste

When to Report	Notification Numbers	What to Report	Written Follow-Up Reports	Mailing Address for Follow-Up Reports	Citation
<p>Immediately report any releases that could threaten human health or the environment outside the facility, or when generator has knowledge that a spill has reached surface water</p>	<p>National Response Center (800) 424-8802</p> <p>Louisiana Department of Environmental Quality - Office of Environmental Assessment (225) 219-3640 or (225) 219-3710 (8 to 4:30) (225) 219-3708 (Fax) (225) 342-1234 (24-hour)</p>	<p>1)Name of person making the notification and telephone number where any return calls from response agencies may be placed; 2)In the event of an incident involving transport, provide the name and address of the transporter and generator;</p> <p>3)Name and location of the facility or site where the unauthorized discharge is imminent or has occurred, using common landmarks;</p>	<p>A written report of the incident must be submitted within 15 days, addressing the items from the telephone notification, and additionally describing the quantity and disposition of any recovered material.</p>	<p>Louisiana Department of Environmental Quality - Office of Environmental Compliance P.O. Box 4312 Baton Rouge, LA 70821-4312 ATTN: ERSD-SPOC "Unauthorized Discharge Notification Report"</p>	<p>Louisiana Administrative Code: LAC33:V.1109(E)(3), LAC33:V.1117 LAC33:V.1513(F)</p>
<p>Report within 1 hour any discharges that may result in emergency conditions (emergency condition is any condition that could reasonable be expected to endanger the health and safety of the public; cause significant adverse impact to the land, water or air environment; or cause severe damage to property)</p>	<p>Local 911</p> <p>Louisiana Department of Public Safety (225) 925-6595 (24-hour)</p> <p>Louisiana Department of Environmental Quality - Office of Environmental Assessment (225) 219-3640 or (225) 219-3710 (8 to 4:30) (225) 219-3708 (Fax) (225) 342-1234 (24-hour)</p>	<p>4)Date and time the incident began and ended, or estimated time the discharge may continue;</p> <p>5)Extent of any injuries and identification of any personnel hazards that response agencies may face;</p> <p>6)Common or scientific name, U.S. Department of Transportation hazard classification, and best estimate of amounts of any or all discharged pollutants;</p> <p>7)Brief description of the incident sufficient to allow response agencies to decide on the level and extent of response activity</p>	<p>A written report of the incident must be submitted within 7 days to the LDEQ, unless the Department indicates otherwise in a permit or regulation. The submittal date will be the date of the postmark (if U.S. mailed) or the date of receipt (if hand-delivered, faxed or couriered).</p> <p>***See page 5 of LA requirements for details of written report***</p>	<p>Louisiana Department of Environmental Quality - Office of Environmental Compliance P.O. Box 4312 Baton Rouge, LA 70821-4312 ATTN: ERSD-SPOC "Unauthorized Discharge Notification Report"</p>	<p>Louisiana Administrative Code: LAC33:I.3915, LAC33:I.3917, LAC33:I.3923, LAC33:I.3925</p>

Written Follow-Up Report - Information to Be Included:

- 1) Name, address, telephone number, Agency Interest (AI) number (as assigned by the Department) if applicable, and any other applicable identification numbers of the person, company, or other party who is filing the written report;
- 2) Specific identification that the document is a written follow-up report;
- 3) Time and date of verbal notification, the state official contacted, name of person making the notification, and identification of the site or facility, vessel, transport vehicle, or storage area from which the unauthorized discharge occurred;
- 4) Dates, times, and duration of the unauthorized discharge, and if not corrected, the anticipated time it is expected to continue;
- 5) Details of the circumstances (unauthorized discharge description and root cause) and events leading to any unauthorized discharge, including incidents of loss of sources of radiation and if the release point is permitted:
 - a) The current permitted limit for the pollutant(s) released;
 - b) The permitted release point/outfall ID;
 - c) Which limits were exceeded (SO₂ limit, mass emission limit, opacity limit, etc.) for air releases
- 6) Common or scientific chemical name of each specific pollutant that was released as the result of an unauthorized discharge, including the CAS number and U.S. Department of Transportation hazard classification, and best estimate of amounts of any or all released pollutants (total amount of each compound expressed in pounds, including calculations).
- 7) Statement of actual or probable fate or disposition of the pollutant and what off-site impact resulted.
- 8) Remedial actions taken, or to be taken, to stop unauthorized discharges or to recover pollutants;
- 9) Procedures or measures that have been or will be adopted to prevent a recurrence of the incident;
- 10) If an unpermitted or unlicensed site or facility is involved in the unauthorized discharge, a schedule for submitting a permit or license application to the office, or the rationale for not requiring a permit or license;
- 11) The reporting party's status (former or present owner, operator, disposer, etc.);
- 12) For discharges to the ground or groundwater, the following information shall also be included: all information of which the reporting party is aware that indicates pollutants are migrating, including, but not limited to, monitoring well data; possible routes of migrations; and all information of which the reporting party is aware regarding any public or private wells in the area of the migration used for drinking, stock watering, or irrigation;
- 13) What other agencies were notified;
- 14) Names of all other responsible parties of which the reporting party is aware;
- 15) A determination by the discharger or whether or not the discharge was preventable; if not, an explanation of why the discharge was not preventable;
- 16) The extent of injuries, if any;
- 17) The estimated quantity, identification, and disposition of recovered materials, if any.

INCIDENT REPORT FORM

Received by: _____ Dispatch # _____ Incident # _____

Date Reported: _____ Time Reported: _____

Spill Incident/Release ☐ Citizen Complaint ☐ Emergency? ☐ Yes ☐ No Drill? ☐ Yes ☐ No

CALLER INFORMATION:	Citizen <input type="checkbox"/>	Industry <input type="checkbox"/>	Anonymous Complaint <input type="checkbox"/>
Other (i.e. Coast Guard): _____			
Name/Company: _____		Title: _____	
Address: _____			
Is caller requesting a follow-up call? Yes <input type="checkbox"/> No <input type="checkbox"/>		Date of Caller Contact: _____	
Telephone No. _____		Parish (of occurrence): _____	

SITE INFORMATION:

Company Name/ _____ Agency Interest # _____

Alleged Violator: _____ Other: _____

Location Address: _____

Is the site an Active or Inactive Site: _____

Date of discharge if different from date report: _____ Time discharge noticed: Began _____ Ended _____

Media Affected: Air ☐ Land ☐ Surface Water ☐ Ground Water ☐ Other _____

If water affected, name of nearest water body (Basin/Subsegment): _____

If air affected, note wind direction and weather conditions (if provided): _____

DESCRIPTION OF RELEASE/SPILL/COMPLAINT: Product/material release and quantity (reported): _____ Product/material released and quantity (actual): _____ Description of release/complaint: _____ _____ How was spill contained? Offsite Impact? _____ How was spilled cleaned/remediated? _____	
--	--

DIRECTIONS FOR REACHING THE SITE: _____

Investigator's Comments:

[illegible]

Region Assigned: _____ Summary Report: Yes ☐ No ☐

Investigator Assigned: _____ Date: _____ Time: _____

Investigator's Signature: _____ Reviewer's Initials & Date: _____

Date Closed: _____ Closed by: Site Visit ☐ Telephone ☐ Other: _____

Referred to: _____ Date: _____ Time: _____

Oil				
When to Report	Notification Numbers	Written Follow-Up Reports / What to Report	Mailing Address for Follow-Up Reports	Citation
<p>Immediately report any spills into State Waters (includes surface and underground waters)</p>	<p>National Response Center (see page 6 for guidance on when to report to NRC) (800) 424-8802</p> <p>911 (If human health/safety is threatened)</p> <p>Arkansas Department of Environmental Quality (501) 682-0716 or (501) 682-0713(8am-5pm) (800) 322-4012 (24-hour)</p> <p>Arkansas Department of Emergency Management (501) 683-6700 (Switchboard) (501) 683-7890 (Fax) (800) 322-4012 (24-hr, In-State)</p>	<p>A written report may be REQUESTED or REQUIRED by the DEQ. Call the notification numbers to inquire if a written follow-up report is required, and if so, the content of the report.</p>		
<p>Immediately report any breaks or leaks from tanks or pipelines from which oil or gas is escaping or has escaped</p>	<p>National Response Center (see page 6 for guidance on when to report to NRC) (800) 424-8802</p> <p>911 (If human health/safety is threatened)</p> <p>Arkansas Oil and Gas Commission: <u>Southern Arkansas</u> (870) 862-4965 (8 to 5) <u>For Northern Arkansas</u> 479-646-6611 (8 to 5) (800) 322-4012 (24-hour)</p>	<p>*NOTE: Reports for oil losses are N/A unless the loss exceeds 25 barrels in the aggregate**</p> <p>1)The location of the well, tank, receptacle or line break by section, township, range and property; 2)The steps that have been taken or are in progress to remedy the situation; 3)The quantity of oil or gas escaped (estimate is OK)</p>	<p>Arkansas Oil and Gas Commission, 2215 West Hillsboro, El Dorado, Arkansas, 71731-1472</p>	<p>Arkansas Oil and Gas Commission, General Rules and Regulations, Rule B-34</p>

Tank Leaks				
When to Report	Notification Numbers	Written Follow-Up Reports/ What to Report	Mailing Address for Follow-Up Reports	Citation
Petroleum tank spills/overfills that exceed 25 gallons: <u>Report Within 24 hours</u>	Arkansas Department of Environmental Quality - Regulated Storage Tanks Division, (501) 682-0999 (8am-4:30pm), (501) 682-0974 (Fax) or (501) 682-0880 (Fax), (800) 322-4012 (24-hour)	Provide written notice of the release or suspected release <u>within 3 business days</u> to ADEQ.	Arkansas Department of Environmental Quality, Regulated Storage Tanks Division, 5301 North shore Drive, North Little Rock, AR 72118-5317	Arkansas Storage Tank Regulations, Regulation No. 12, Chapter 1, Section 12.104, incorporating 40 CFR 280, Subpart E - Minimum Federal Requirements
Petroleum tank spills/overfills that cause a sheen on nearby surface waters: <u>Report Within 24 hours</u>				
Petroleum tank spills that are not cleaned up within 24 hours: <u>Report Immediately</u>				

Hazardous Waste				
When to Report	Notification Numbers	What to Report	Written Follow-Up	Citation
<p><u>Immediately</u> report any releases that could threaten human health outside the facility, or when the generator knows the spill has reached surface water</p>	<p>National Response Center (see page 6 for guidance on when to report to NRC), (800) 424-8802,</p> <p>911 (If human health/safety is threatened)</p> <p>Arkansas Department of Environmental Quality - Hazardous Waste Division, (501) 682-0716 or (501) 682-0713 (8am-5pm), (800) 322-4012 (24-hour)</p> <p>Arkansas Department of Emergency Management, (501) 683-6700 (Switchboard), (501) 683-7890 (Fax), (800) 322-4012 (24-hr, In-State)</p>	<p>1)Name, address, EPA ID Number of waste generator; 2)Date, time, type of incident; 3)Quantity and type of hazardous waste involved; 4)Extent of any injuries; 5)Estimated quantity and disposition of any recovered materials</p>	<p>A written report may be REQUESTED or REQUIRED by the DEQ. Call the notification numbers to inquire if a written follow-up report is required, and if so, the content of the report.</p> <p>Contact the ADEM for Mailing Addresses</p>	<p>Arkansas Hazardous Waste Management Code: ARR Reg.23-2§262.34(d)(5)(iv)(C)</p>

ADEM Incident Report

Print Form

Name of Person Requesting			
<input type="checkbox"/> Check if Incident has been previously reported			
Incident Number if Known			
Incident Location			
County		<input type="checkbox"/> Check if Road Blocked	
City			
Exact Location/Address		Highway/Street Name	

Hazardous Material(s) Information

Date Occurred		<input type="checkbox"/> Check if affected Waterway is a public source of water?
Hazardous Material(s)		<input type="checkbox"/> Check if wildlife is endangered/threatened
<input type="checkbox"/> Check here if a Waterway was affected		Name of Waterway

Vehicle Information

Vehicle Type	
Owner	
Address	

Check all that is applicable

- ☐ Minor Injury - No Transport
☐ Major Injury - Transport to Hospital
☐ Fatality

Environmental Cleanup Company Information

<input type="checkbox"/> Check to show if Owner has been notified	
Contact Phone Number	
Environmental Cleanup Co.	
Cleanup Co Address	
Cleanup Co. Phone Number	

Evacuation

<input type="checkbox"/> Check if incident area has been evacuated	
Total of Evacuees	<input type="text"/>
Description of Evacuated Area	<input type="text"/>
<input type="checkbox"/> Check if Shelter has been Opened	
Shelter Location	<input type="text"/>
Number of evacuees in Shelter	<input type="text"/>
<input type="checkbox"/> Check if Red Cross has been notified	

Emergency Response

Arkansas State Police	<input type="radio"/> Notified	<input type="radio"/> On Scene
Arkansas Hwy Police	<input type="radio"/> Notified	<input type="radio"/> On Scene
ADEM	<input type="radio"/> Notified	<input type="radio"/> On Scene
County Sheriff's Office	<input type="radio"/> Notified	<input type="radio"/> On Scene
City Police Department	<input type="radio"/> Notified	<input type="radio"/> On Scene
ADEQ	<input type="radio"/> Notified	<input type="radio"/> On Scene
State Health	<input type="radio"/> Notified	<input type="radio"/> On Scene
AR Game & Fish Commission	<input type="radio"/> Notified	<input type="radio"/> On Scene
Ambulance/EMT	<input type="radio"/> Notified	<input type="radio"/> On Scene
Highway Department	<input type="radio"/> Notified	<input type="radio"/> On Scene
Fire/Rescue	<input type="radio"/> Notified	<input type="radio"/> On Scene
Environmental Clean_up Co.	<input type="radio"/> Notified	<input type="radio"/> On Scene
Company Representative/ Responsible Party	<input type="radio"/> Notified	<input type="radio"/> On Scene

☐ Check if National Response Center has been Notified

Name of Environmental Clean-up Company

Name of Company Representative/Responsible Party



APPENDIX C

TARGET SHEET

SITE NAME: SUNOCO PIPELINE LP FACILITY

CERCLIS I.D.: NONSITESPECI

TITLE OF DOC.: SUNOCO PIPELINE LP FACILITY RESPONSE
PLAN - LONGVIEW DISTRICT RESPONSE ZONE
- REVISED SEPTEMBER 2012

DATE OF DOC.: 08/19/2014

NO. OF PGS. THIS TARGET SHEET REPLACES: 65

SDMS #: 9559224 **KEYWORD:** 91.99

SENSITIVE ? ☒ **MISSING PAGES ?** ☐

ALTERN. MEDIA ? ☐ **CROSS REFERENCE ?** ☐

LAB DOCUMENT ? ☐ **LAB NAME:**

ASC./BOX #:

CASE #: **SDG #:**

THIS TARGET SHEET REPLACES APPENDIX C: OIL
SPILL RESPONSE ORGANIZATIONS - APPENDIX C
IS BEING WITHHELD UNDER FOIA EXEMPTION (b)(4)
- CONFIDENTIAL BUSINESS INFORMATION

COMMENTS :



APPENDIX D

APPENDIX D

EMERGENCY RESPONSE PERSONNEL JOB DESCRIPTIONS AND GUIDELINES

The following job descriptions and guidelines are intended to be used as a tool to assist ERP members in their particular positions within the Incident Command System (ICS):

- Incident Commander
- Public Information Officer
- Liaison Officer
- Safety Officer
- Operations Section Chief
- Staging Group Leader
- Repair Group Leader
- Containment Group Leader
- Planning Section Chief
- Environmental Group Leader
- Situation Group Leader
- Logistics Section Chief
- Communications Group Leader
- Security/Medical Group Leader
- Supply/Ground Support Group Leader
- Finance Section Chief
- Accounting Group Leader
- Claims Group Leader
- Legal Group Leader
- Business Resumption Section Chief
- Repair Coordinator

INCIDENT COMMANDER

The Incident Commander (IC) manages all activities related to an emergency response and acts as Qualified Individual (QI). As such, the Incident Commander needs to be familiar with the contents of the Facility Response Plan (FRP), Oil Spill Response Plan (OSRP), Emergency Response Action Plan (ERAP), and the Spill Prevention Control and Countermeasure Plan (SPCC). The Incident Commander (IC) must also be familiar with the operation of the Incident Command System (ICS) and the Unified Command Structure (UCS).

The primary goal of this system is to establish and maintain control of the emergency response. If the emergency involves a multi-jurisdictional response (Federal and State), the Unified Command Structure (UCS) should be established. **Realize that the Federal On-Scene Coordinator (FOSC) does have the authority to override the Incident Commander and assume control of the response.** Every effort should be made to establish a collaborative relationship to manage the incident site with the appropriate responding agencies.

As soon as possible following an incident, a critique of the response shall be conducted and follow-up action items identified. Participants may include Operations Control personnel, Company supervisors, and employees and outside agencies involved in the response.

Responsibilities:

- Maintain Activity Log.
- Establish Incident Command/Unified Command Post.
- Activate necessary section(s) of the Incident Command System (ICS) to deal with the emergency. Fill out the appropriate section(s) of the Incident Command organization chart and post it at the Incident Command Center.
- Develop goals and objectives for response.
- Work with Safety Officer and Planning Section Chief to develop a Site Safety Plan (SSP).
- Approve, authorize, and distribute Incident Action Plan (IAP) and SSP.
- Conduct planning meetings and briefings with the section chiefs.
- As Qualified Individual coordinate actions with Federal On-Scene Coordinator (FOSC) and State On-Scene Coordinator (SOSC).
- In a multi-jurisdictional response, ensure all agencies are represented in the ICS.
- Coordinate /approve media information releases with the FOSC, SOSC, and Public Information Officer (PIO).
- Keep management informed of developments and progress.
- Authorize demobilization of resources as they are no longer needed.
- Complete Incident Debriefing Form

PUBLIC INFORMATION OFFICER

The Public Information Officer (PIO) provides critical contact between the media/public and the emergency responders. The PIO is responsible for developing and releasing information about the incident to the news media, incident personnel, appropriate agencies and public. When the response is multi-jurisdictional (involves the federal and state agencies), the PIO must coordinate gathering and releasing information with these agencies.

The PIO needs to communicate that the Company is conducting an effective response to the emergency. The PIO is responsible for communicating the needs and concerns of the public to the Incident Commander (IC).

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from IC.
- Participate in all planning meetings and briefings.
- Obtain outside information that may be useful to incident planning.
- Develop goals and objectives regarding public information.
- Arrange for necessary workspace, materials, telephones and staffing for Public Information Center (PIC).
- Establish a PIC, ensuring all appropriate agencies participate.
- Provide a single point of media contact for the IC.
- Coordinate media access to the response site as approved by the IC.
- Obtain approval for release of information from the IC.
- Arrange for meetings between media and emergency responders.
- Maintain list of all media present.
- Participate in Post Incident Review.

LIAISON OFFICER

If a Unified Command Structure is not established, a Liaison Officer is appointed as the point of contact for personnel assigned to the incident from assisting or cooperating agencies.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Incident Commander (IC).
- Participate in planning meetings and briefings.
- Identify and maintain communications link with agency representatives, assisting, and coordinating agencies.
- Identify current or potential inter-organizational issues and advise IC as appropriate.
- Coordinate with Legal Group Leader and Public Information Officer (PIO) regarding information and documents released to government agencies.
- Participate in Post Incident Review

SAFETY OFFICER

The Safety Officer is responsible for assessing and monitoring hazardous and unsafe situations at the emergency response site(s). The Safety Officer must develop measures that assure the safety of the public and response personnel. This involves maintaining an awareness of active and developing situations, ensuring the preparation and implementation of the Site Safety Plan (SSP) and assessing safety issues related to the Incident Action Plans (IAP).

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Incident Commander (IC).
- Develop, implement, and disseminate SSP with IC and section chiefs.
- Participate in planning meetings and briefings.
- Establish safety staff if necessary.
- Identify emergency contact numbers. Fill out emergency contact chart and post in the Incident Command Center.
- Conduct safety briefings with all emergency responders.
- Investigate accidents that have occurred during emergency response.
- Ensure proper hazard zones are established.
- Ensure all emergency responders have appropriate level of training.
- Ensure proper Personal Protective Equipment (PPE) is available and used.
- Advise Security/Medical Group Leader concerning PPE requirements.
- Ensure emergency alarms/warning systems are in place as needed.
- Participate in Post Incident Review

OPERATIONS SECTION CHIEF

The Operations Section Chief is responsible for the management of all operations applicable to the field response and site restoration activities. Operations directs field activities based on the Incident Action Plan (IAP) and Site Safety Plan (SSP).

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Incident Commander (IC).
- Participate in Incident Command planning meetings and briefings.
- Conduct planning meetings and briefings for Operations Section.
- Develop operations portion of IAP.
- Supervise the implementation of the IAP.
- Make or approve expedient changes to the IAP.
- Request resources needed to implement IAP.
- Approve list of resources to be released.
- Ensure safe tactical operations.
- Establish a staging area for personnel and equipment.
- Confirm first responder actions.
- Confirm the completion of rescue/evacuation and administering of first aid.
- Confirm site perimeters have been established.
- Coordinate activities of public safety responders, contractors, and mutual assistance organizations.
- Participate in Post Incident Review

STAGING GROUP LEADER

The Staging Group Leader is responsible for managing all activities within the staging area(s). The Staging Group Leader will collect, organize, and allocate resources to the various response locations as directed by Operations Section Chief.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Operations Section Chief.
- Participate in Operations' planning meetings and briefings.
- Advise Operations Section Chief of equipment location and operational status.
- Periodically advise Operations Section Chief on inventory status of consumable items (sorbent pads, sorbent boom, etc.).
- Coordinate with Logistics Section Chief regarding inbound equipment, personnel, and supplies.
- Participate in development of Operations' portion of Incident Action Plan (IAP).
- Establish check-in function and inventory control as appropriate.
- Allocate personnel/equipment to site(s) as requested.
- Establish and maintain boundaries of staging area(s).
- Demobilize/relocate staging area as needed.
- Post signs for identification and traffic control.
- Participate in Post Incident Review

REPAIR GROUP LEADER

The Repair Group Leader is responsible for supervising the repair and restoration of pipeline facilities.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Operations Section Chief.
- Periodically advise Operations Section Chief on status of restoration activities.
- Conduct frequent hazard assessments and coordinate safety needs with Operations Section Chief and Safety Officer.
- Participate in Operations' planning meetings and briefings.
- Participate in development of Operations' portion of Incident Action Plan (IAP).
- Conduct facility restoration activities in accordance with Company procedures, Site Safety Plan (SSP) and IAP.
- Determine and request additional materials, equipment, and personnel as needed.
- Ensure all equipment is decontaminated prior to being released.
- Participate in Post Incident Review

CONTAINMENT GROUP LEADER

The Containment Group Leader is responsible for supervising the containment and recovery of spilled product and contaminated environmental media both on land and on water.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Operations Section Chief.
- Participate in Operations' planning meetings and briefings.
- Participate in development of Operations' portion of Incident Action Plan (IAP).
- Conduct activities in accordance with the IAP.
- Assess overall situation for containment and recovery needs and supervise group activities.
- Periodically advise the Operations Section Chief on the status of containment and recovery actions.
- Ensure hazard zones are established and maintained.
- Ensure adequate communication equipment for the containment group response.
- Determine and request additional resources as needed.
- Participate in Post Incident Review

PLANNING SECTION CHIEF

The Planning Section Chief is responsible for collecting, evaluating, and disseminating information related to the current and future events of the response effort. The Planning Section Chief must understand the current situation; predict the future course of events; predict future needs; develop response and cleanup strategies; and review the incident once complete.

The Planning Section Chief must coordinate activities with the Incident Commander (IC) and other Section Chiefs to ensure that current and future needs are appropriately handled.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from the IC.
- Establish and maintain communication with IC and other Section Chiefs.
- Advise IC on any significant changes of incident status.
- Conduct planning meetings and briefings for Planning section.
- Coordinate and provide input to the preparation of the Incident Action Plan (IAP).
- Participate in Incident Command planning meetings and briefings.
- In a multi-jurisdictional response, ensure that all agencies are represented in the Planning Section.
- Coordinate future needs for the emergency response.
- Determine response personnel needs.
- Determine personnel needs and request personnel for Planning section.
- Assign technical specialists (archaeologists, historians, biologists, etc.) where needed.
- Collect and analyze information on the situation.
- Assemble information on alternative response and cleanup strategies.
- Ensure situation status unit has a current organization chart of the Incident Command Organization.
- Provide periodic spill movement/migration prediction.
- Participate in Post Incident Review

ENVIRONMENTAL GROUP LEADER

The Environmental Group Leader is responsible for ensuring that all areas impacted by the release are identified and cleaned up following company and regulatory standards. The Environmental Group Leader supports Planning and Operations to minimize and document the environmental impact of the release.

The Environmental Group Leader must plan for future site considerations such as long-term remediation and alternative response strategies in unusually sensitive areas. In a Unified Command Structure (UCS), representatives from the federal and state responding agencies will be included in this group.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from the Planning Section Chief.
- Participate in Planning section meetings and briefings.
- Participate in development of Planning's portion of Incident Action Plan (IAP).
- Coordinate environmental activities with responding regulatory agencies.
- Periodically advise the Planning Section Chief on status of group activities.
- Request additional personnel/specialists to support response effort.
- Determine environmental group resource needs.
- Identify and develop a prioritized list of natural, cultural, and economic (NCE) resources at risk.
- Initiate and coordinate Natural Resources Damage Assessment (NRDA) activities.
- Develop a management plan for recovered contaminated media and ensure coordination with Containment Group Leader.
- Ensure proper management of injured/oiled wildlife.
- Determine alternative cleanup strategies for response.
- Participate in Post Incident Review

SITUATION GROUP LEADER

The Situation Group Leader is responsible for the collection, evaluation, display, and dissemination of all information related to the emergency response effort. The Situation Group Leader must establish and maintain communications with all portions of the Incident Command and the response site in order to collect the information. The Situation Group Leader also attempts to predict spill movement/migration and identifies areas that may be impacted by the emergency.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from the Planning Section Chief.
- Participate in Planning section meetings and briefings.
- Participate in development of Planning's portion of Incident Action Plan (IAP).
- Maintain a master list of response resources ordered, in staging and in use.
- Collect and display current status of requested response resources.
- Collect and display current status of resources, current spill location, personnel, and weather.
- Analyze current information to determine spill trajectory and potential impacts.
- Disseminate information concerning the situation status upon request from the emergency responders.
- Provide photographic services and maps.
- Establish periodic reconnaissance of impacted area to support information needs.
- Collect information on the status of the implementation of Incident Action Plans. Display this information in the Incident Command Center.
- Participate in Post Incident Review

LOGISTICS SECTION CHIEF

The Logistics Section Chief is responsible for procuring facilities, services, and material in support of the emergency response effort.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from the Incident Commander (IC).
- Participate in Incident Command planning meetings and briefings.
- Conduct planning meetings and briefings for Logistics section.
- Participate in the preparation of the Incident Action Plan (IAP).
- Identify service and support requirements for planned operations.
- Identify sources of supply for identified and potential needs.
- Advise IC on current service and support requirements.
- Procure needed materials, equipment and services from sources by means consistent with the timing requirements of the IAP and Operations.
- Ensure all purchases are documented.
- Participate in Post Incident Review

COMMUNICATIONS GROUP LEADER

The Communications Group Leader is responsible for ensuring that the Incident Command and emergency responders have reliable and effective means of communication. This may involve activation of multiple types of communications equipment and coordination among multiple responding agencies and contractors.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Logistics Section Chief.
- Periodically advise Logistics Section Chief on status of communications group.
- Participate in Logistics section planning meetings and briefings.
- Participate in development of Logistics' portion of Incident Action Plan (IAP).
- Establish an Incident Command communications center.
- Ensure Incident Commander (IC) has communications compatible with other response agencies.
- Identify all communications circuits/equipment used by emergency responders and keep a chart updated with this information.
- Determine the type and amount of communications required to support the response effort (computer, radio, telephone, fax, etc.).
- Ensure timely establishment of adequate communications equipment and systems.
- Advise Logistics Section Chief on communications capabilities/limitations.
- Establish an equipment inventory control system for communications gear.
- Ensure all equipment is tested and repaired.
- Participate in Post Incident Review

SECURITY/MEDICAL GROUP LEADER

The Security/Medical Group Leader is responsible for developing a plan to deal with medical emergencies, obtaining medical aid and transportation for emergency response personnel, and preparation of reports and records.

The Security/Medical Group Leader is responsible for providing safeguards needed to protect personnel and property from loss or damage. The Security/Medical Group Leader also controls access to the emergency site and Incident Command Center.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Logistics Section Chief.
- Periodically advise Logistics Section Chief on the status of security and medical problems.
- Participate in Logistics meetings and briefings.
- Participate in development of Logistics' portion of Incident Action Plan (IAP).
- Determine and develop security/medical support plan needs.
- Request medical or security personnel, as needed.
- Work with Safety Officer to identify/coordinate local emergency medical services.
- Coordinate with Safety Officer and Operations Section Chief to establish the Site Safety Plan (SSP) with site boundaries, hazard zones, escape routes, staging areas, Command Center and Personal Protective Equipment (PPE) requirements.
- Coordinate/develop an identification system in order to control access to the incident site.
- Participate in Post Incident Review

SUPPLY/GROUND SUPPORT GROUP LEADER

The Supply/Ground Support Group Leader is responsible for procurement and the disposition of personnel, equipment, and supplies; receiving and storing all supplies for the incident; maintaining an inventory of supplies; and servicing non-expendable supplies and equipment. The Supply/Ground Support Group Leader supports the following: transportation of personnel; supplies, food, equipment; and fueling, service, maintenance and repair of vehicles and equipment.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Logistics Section Chief.
- Periodically advise Logistics Section Chief on status of supply/ground support group.
- Participate in Logistics meetings and briefings.
- Participate in development of Logistics' portion of Incident Action Plan (IAP).
- Communicate with Staging Group Leader concerning material, equipment and personnel that are inbound and the approximate time of arrival.
- Coordinate with other Section Chiefs to ascertain the priority of needed materials, equipment and services.
- Coordinate with Finance Section Chief to establish accounts, purchase orders, AFEs and procedures as necessary.
- Establish an inventory control system for materials and equipment.
- Maintain roads, when necessary.
- Participate in Post Incident Review

FINANCE SECTION CHIEF

The Finance Section Chief is responsible for accounting, legal, right-of-way and risk management functions that support the emergency response effort. In this role, the primary responsibility is supporting the Command Staff and Logistics Section matters pertaining to expenses during and following the emergency response.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Incident Commander (IC).
- Participate in Incident Command planning meetings and briefings.
- Conduct planning meetings and briefings for Finance section.
- Participate in preparation of the Incident Action Plan (IAP).
- Participate in planning meetings.
- Participate in Unified Command System (UCS) as incident warrants.
- Request assistance of corporate accounting, legal, right-of-way or risk management as needed.
- Assist with contracting administration.
- Participate in Post Incident Review

ACCOUNTING GROUP LEADER

The Accounting Group Leader is responsible for accumulating and dispensing funding during an emergency response. All charges directly attributed to the incident should be accounted for in the proper charge areas.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Finance Section Chief.
- Periodically advise Finance Section Chief.
- Participate in Finance planning meetings and briefings.
- Participate in development of Finance's portion of Incident Action Plan (IAP).
- Make recommendations for cost savings to Finance and Logistics Section Chiefs.
- Establish accounts as necessary to support the Logistics section.
- Ensure all invoices are documented, verified, and paid accordingly.
- Involve corporate accounting group for assistance as necessary.
- Participate in Post Incident Review

CLAIMS GROUP LEADER

The Claims Group Leader is responsible for managing all risk management and right-of-way issues at, during, and following an emergency response. It is important that all claims are investigated and handled expediently.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Finance Section Chief.
- Participate in Finance planning meetings and briefings.
- Participate in development of Finance's portion of Incident Action Plan (IAP).
- Periodically inform affected parties of status of emergency response.
- Review and authorize payment of all claims.
- Provide needs of evacuated persons or groups.
- Purchase or acquire property.
- Inform and update necessary insurance groups and underwriters.
- Involve corporate Risk Management or Land, Records, and Claims as needed.
- Participate in Post Incident Review

LEGAL GROUP LEADER

The Legal Group Leader is responsible for advising the Incident Command Staff and Section Chiefs on all matters that may involve legal issues.

Responsibilities:

- Maintain Activity Log.
- Obtain briefing from Finance Section Chief.
- Periodically advise Finance Section Chief of status.
- Participate in Finance planning meetings and briefings.
- Participate in development of Finance's portion of Incident Action Plan (IAP).
- Conduct investigations per Incident Commander's (IC) request.
- Provide skilled negotiators.
- Communicate to all affected emergency response personnel if work product is declared "Attorney-Client Privilege. "
- Participate in Post Incident Review

BUSINESS RESUMPTION SECTION CHIEF

The Business Resumption Section Chief is responsible for managing and directing activities of the repair crews and contractors.

Responsibilities:

- Establish and direct the repairs activities.
- Ensure that all work is done in a manner to ensure the safety of all employees and the public.
- Establish and direct any required staging activities.
- Participate in Post Incident Review

REPAIR COORDINATOR

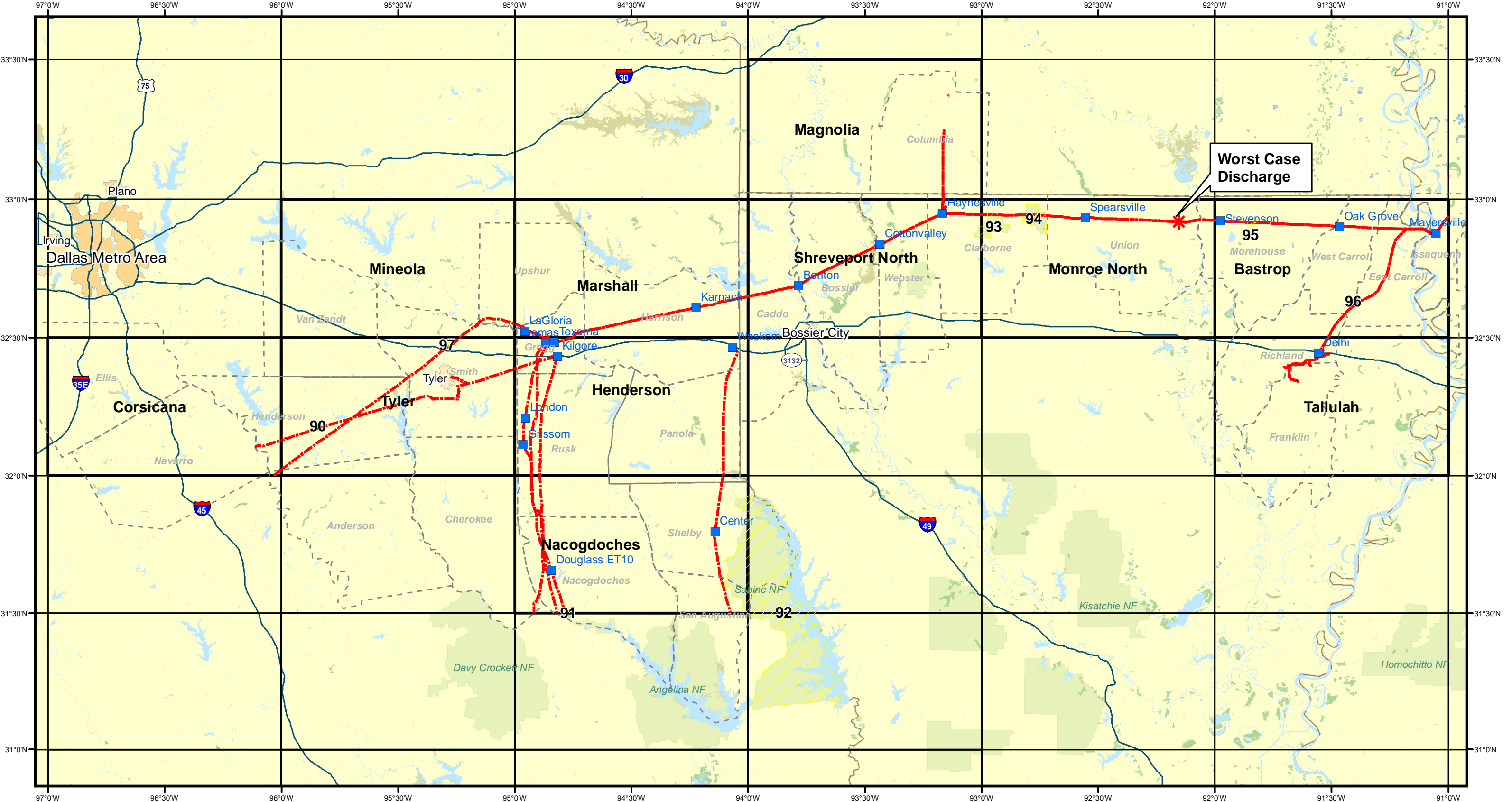
The Repair Coordinator is responsible for the timely, efficient, and safe repair of the damaged pipeline segment so that loss of service will be as brief as possible without compromising safety or integrity of repair. Ensure that temporary and/or permanent repair of the affected asset is done in accordance with approved methods.

Responsibilities:

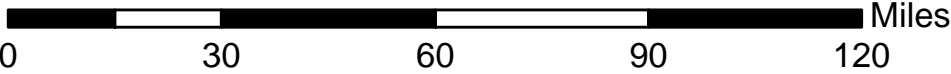
- Determine extent and cause of damage.
- Obtain necessary materials, personnel and equipment to repair damage.
- Plan and execute repairs.
- Verify that repairs are complete and sound using proven test methods (x-ray, hydrostatic test or other accepted methods) and in compliance with DOT requirements.
- Supervise completion of repair by the use of proper back-fill materials and techniques.
- Return the ROW to acceptable condition.
- Inform the Incident Commander when pipeline is ready for return to service.
- Coordinate activities with HES and DOT representatives.
- Participate in Post Incident Review



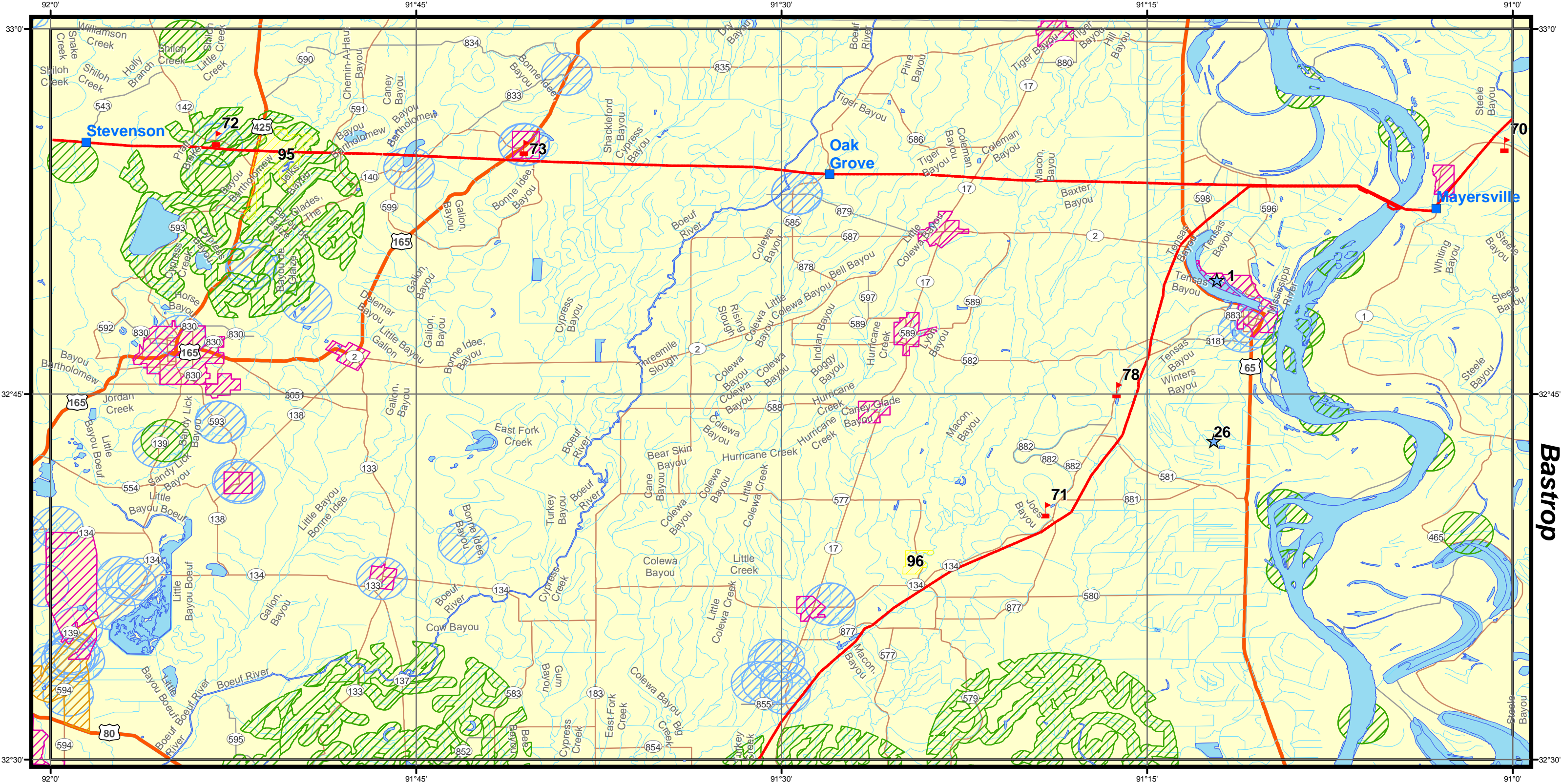
APPENDIX E



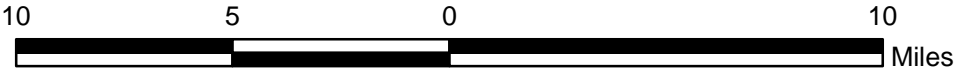
WESTERN AREA
Mid-Valley Pipeline Company
Longview District



- Legend**
- Stations
 - Sunoco Pipeline L.P.
 - - - Counties
 - 1:100,000 Quads

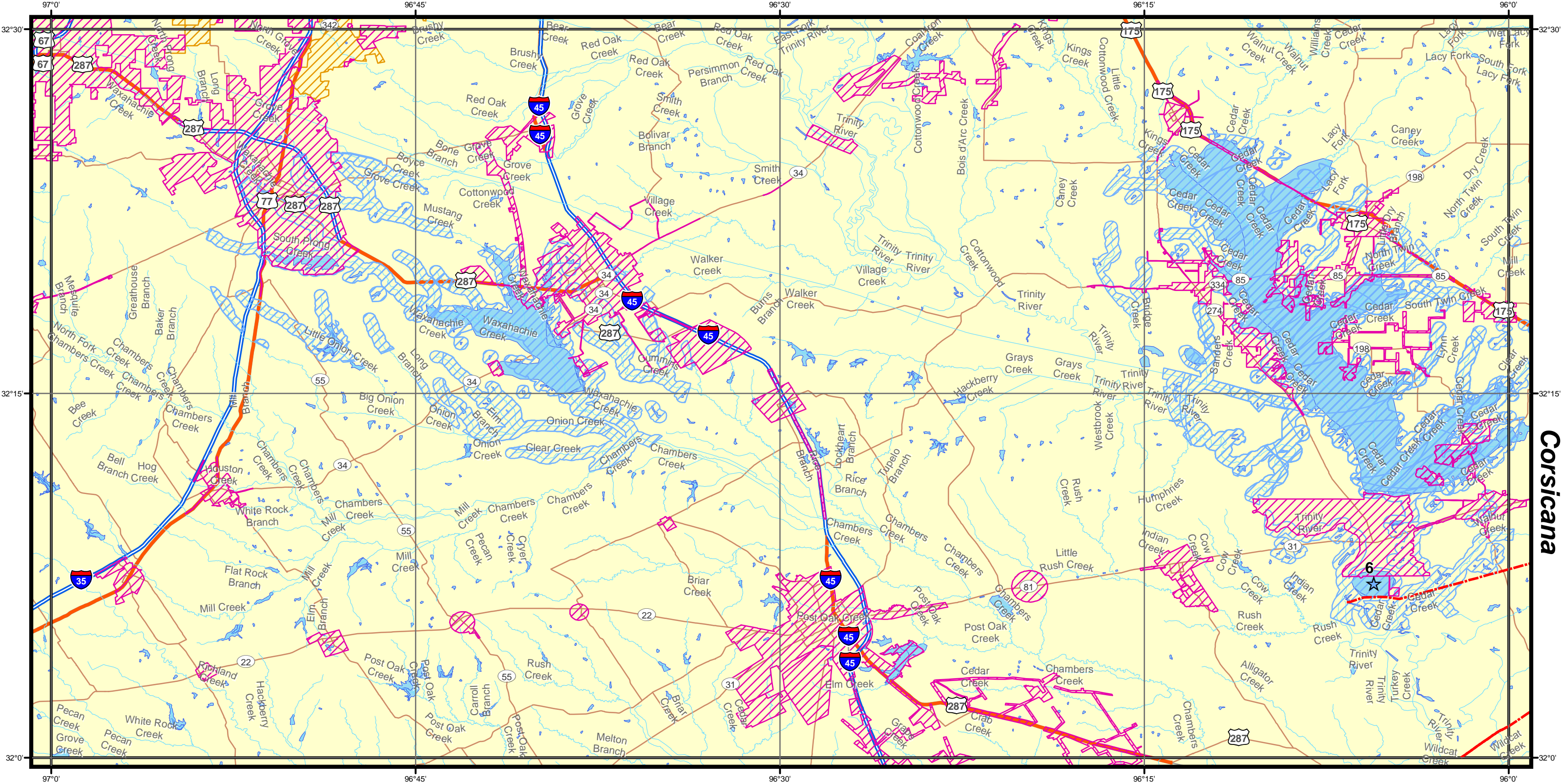


Bastrop

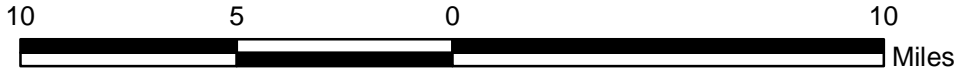


- LEGEND**

 - Sunoco Pipeline L.P.
 - Stations
 - Municipal Water Intake
 - Schools
 - OPA
 - ECO
 - DWA
 - Parks/Recreation Areas

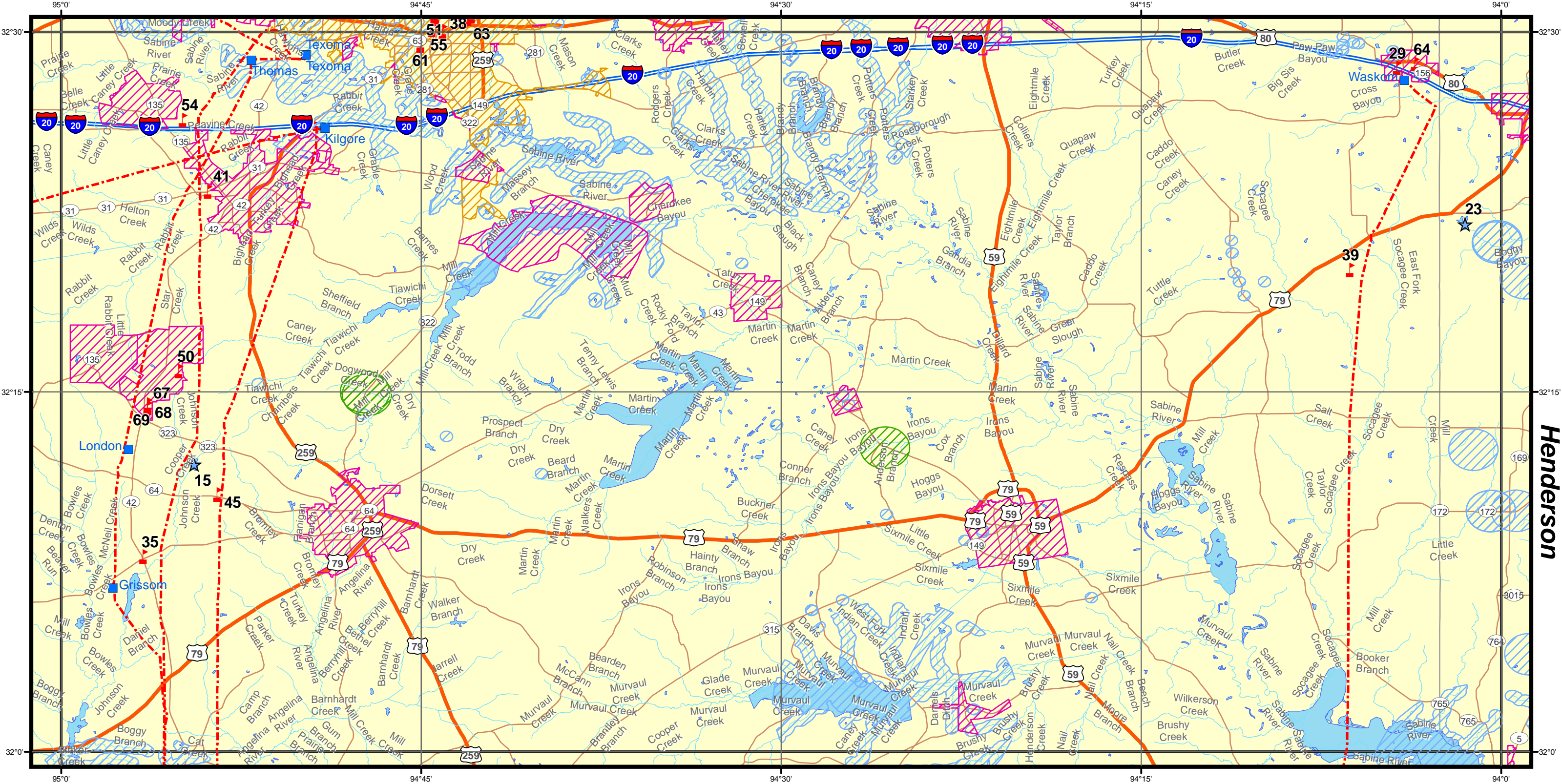


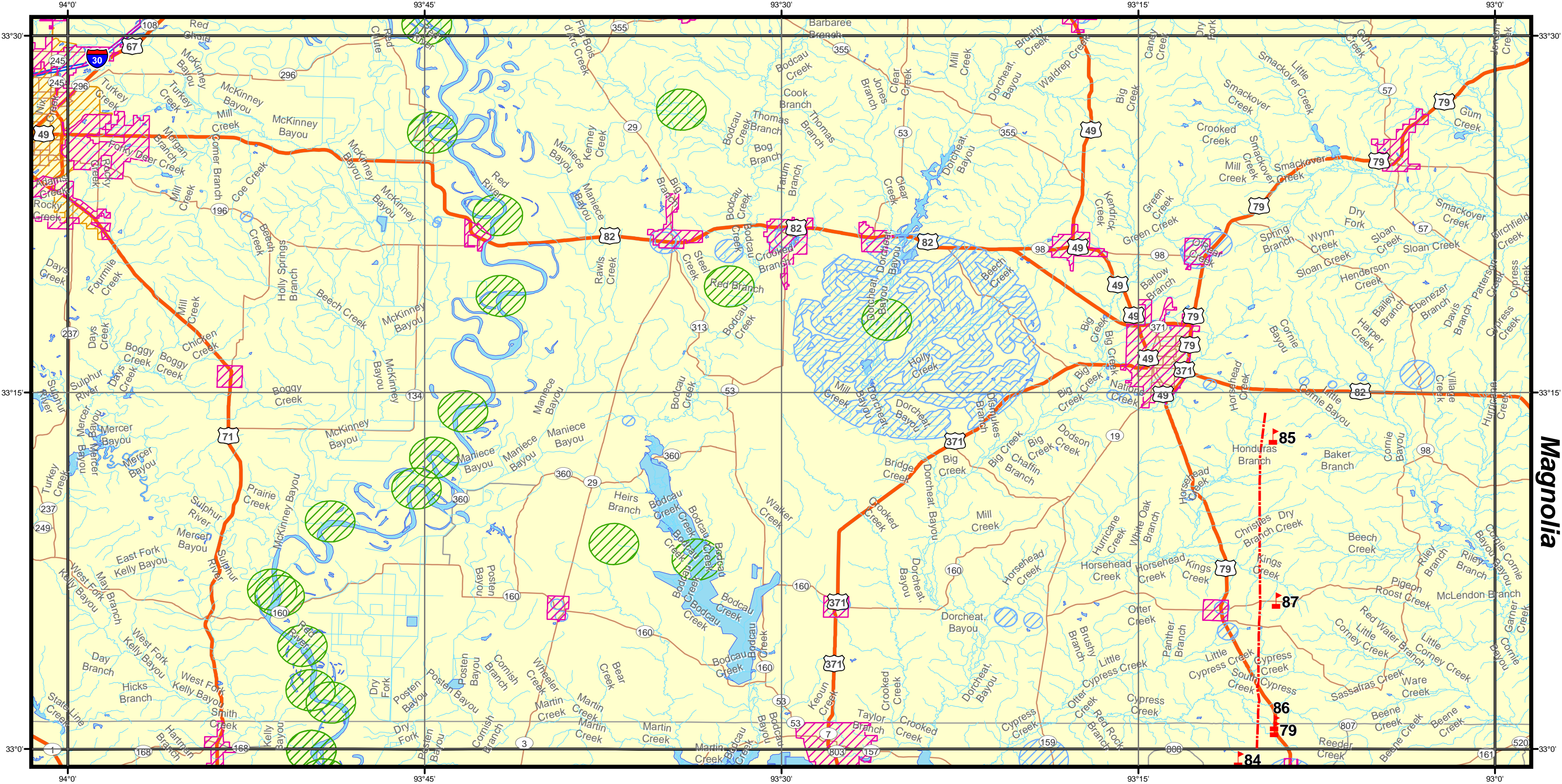
Corsicana



LEGEND

- Sunoco Pipeline L.P.
- ★ Municipal Water Intake
- OPA
- HPA
- DWA
- Parks/Recreation Areas





Magnolia

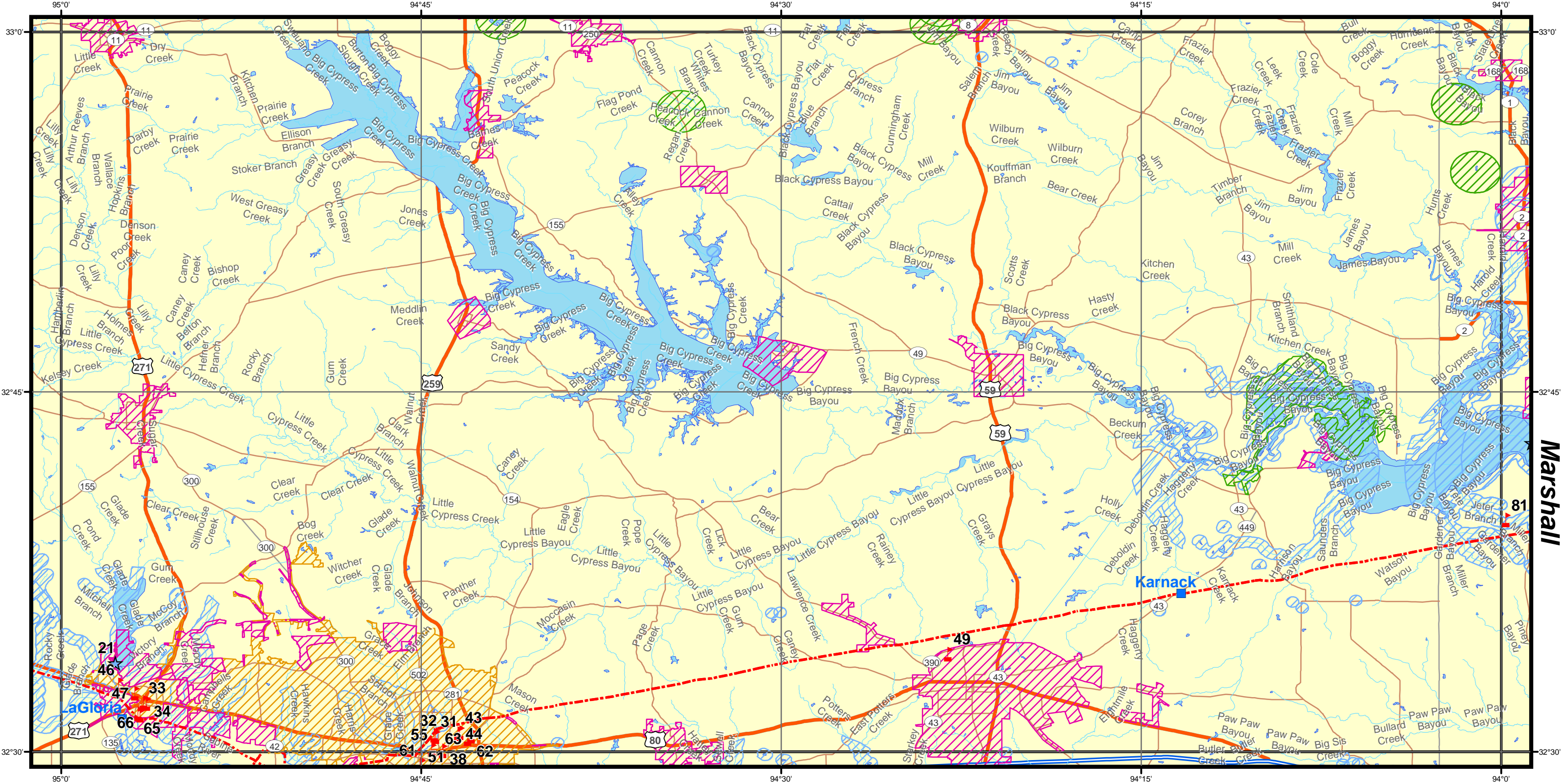


Magnolia

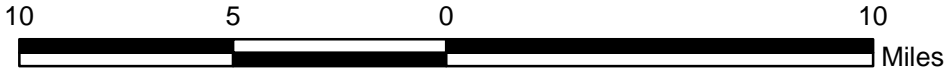


LEGEND

	Sunoco Pipeline L.P.		OPA
	Schools		HPA
			ECO
			DWA

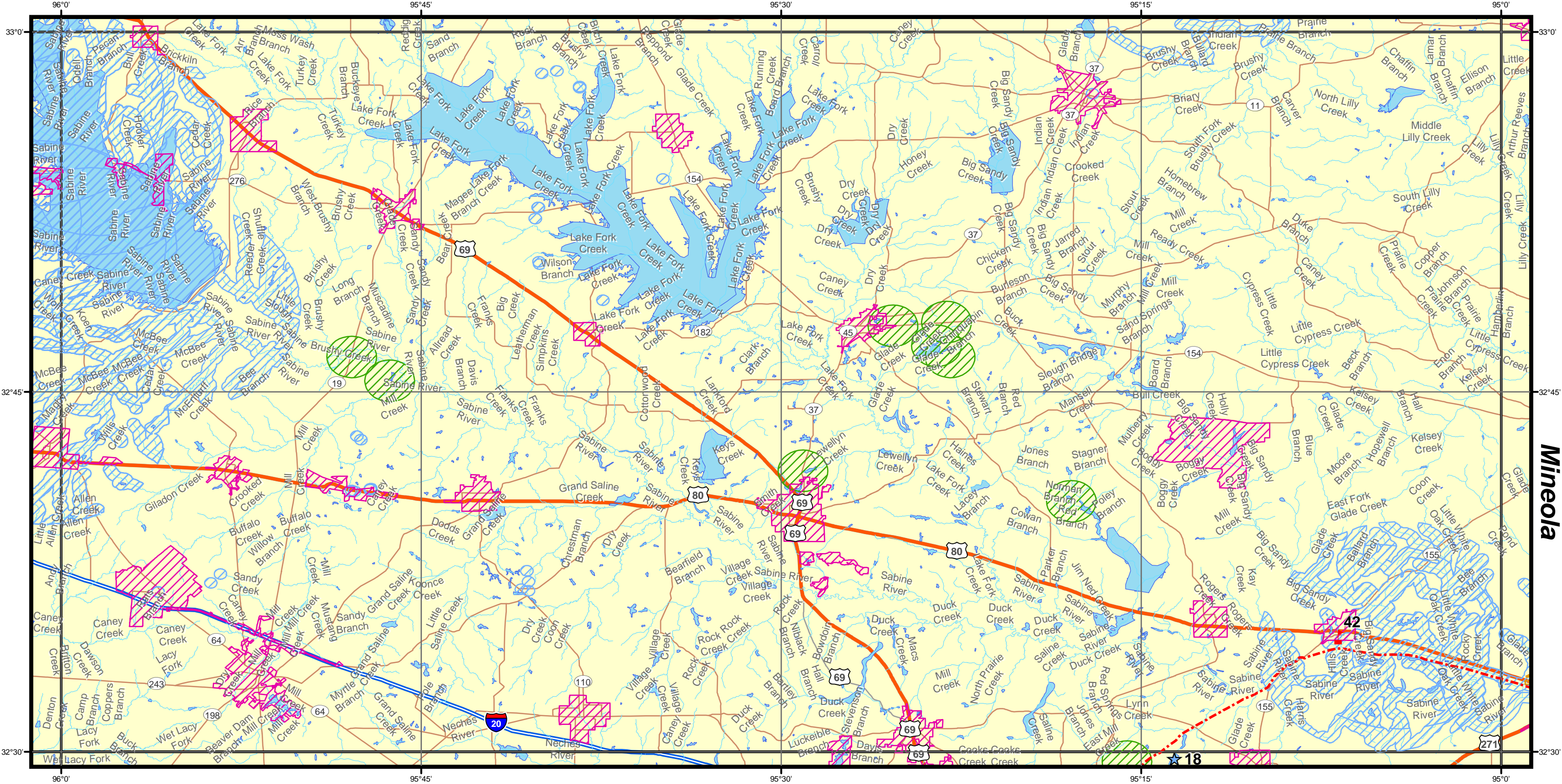


Marshall

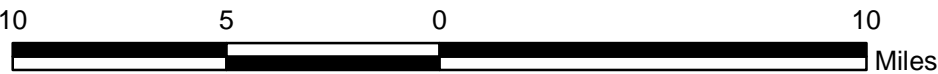


Legend

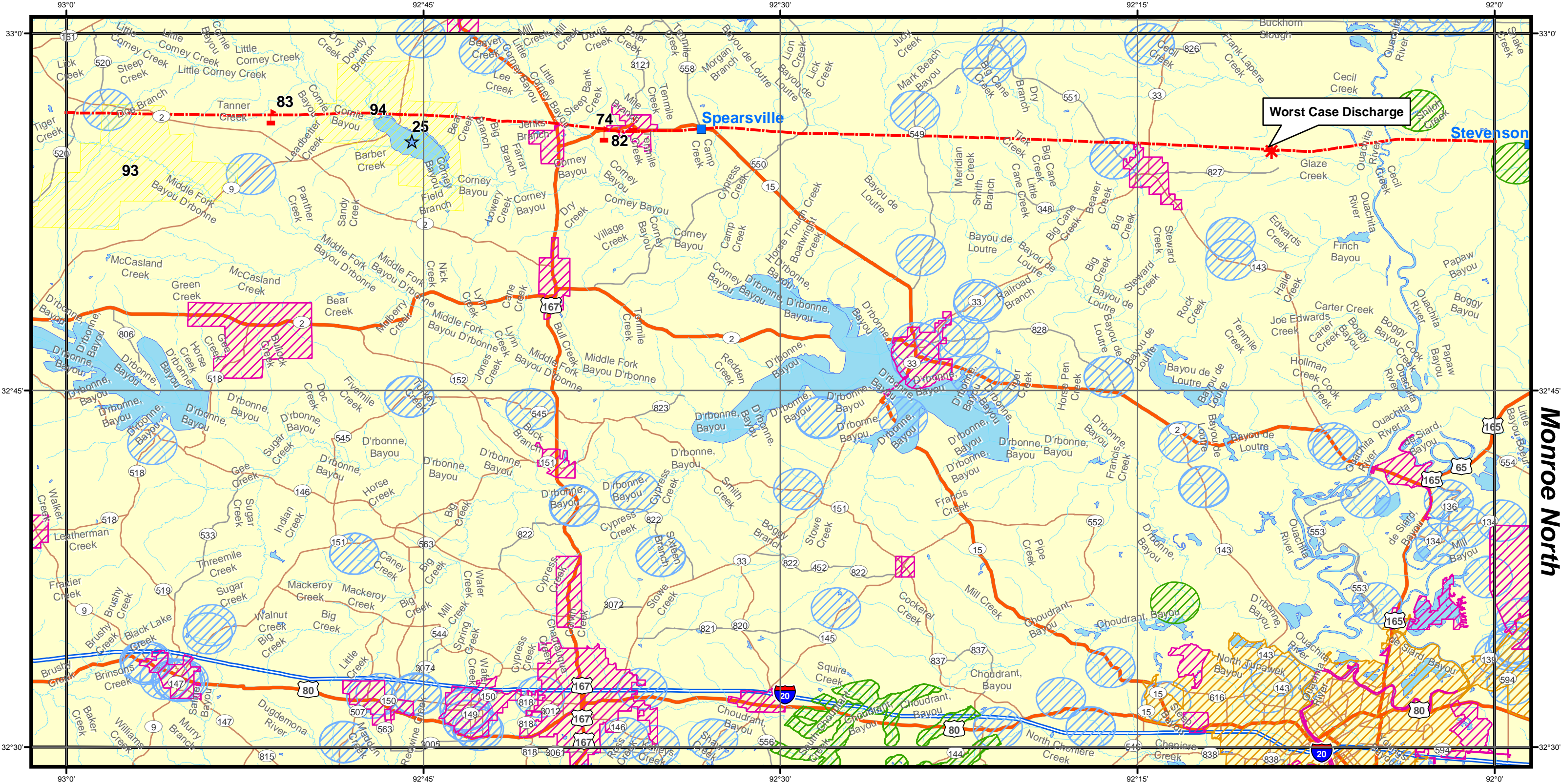
- Stations
- Sunoco Pipeline L.P.
- Municipal Water Intake
- Schools
- OPA
- HPA
- ECO
- DWA



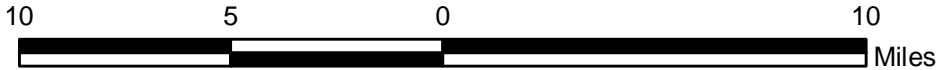
Mineola



- Legend**
- Sunoco Pipeline L.P.
 - ★ Municipal Water Intake
 - ▲ Schools
 - OPA
 - ECO
 - DWA

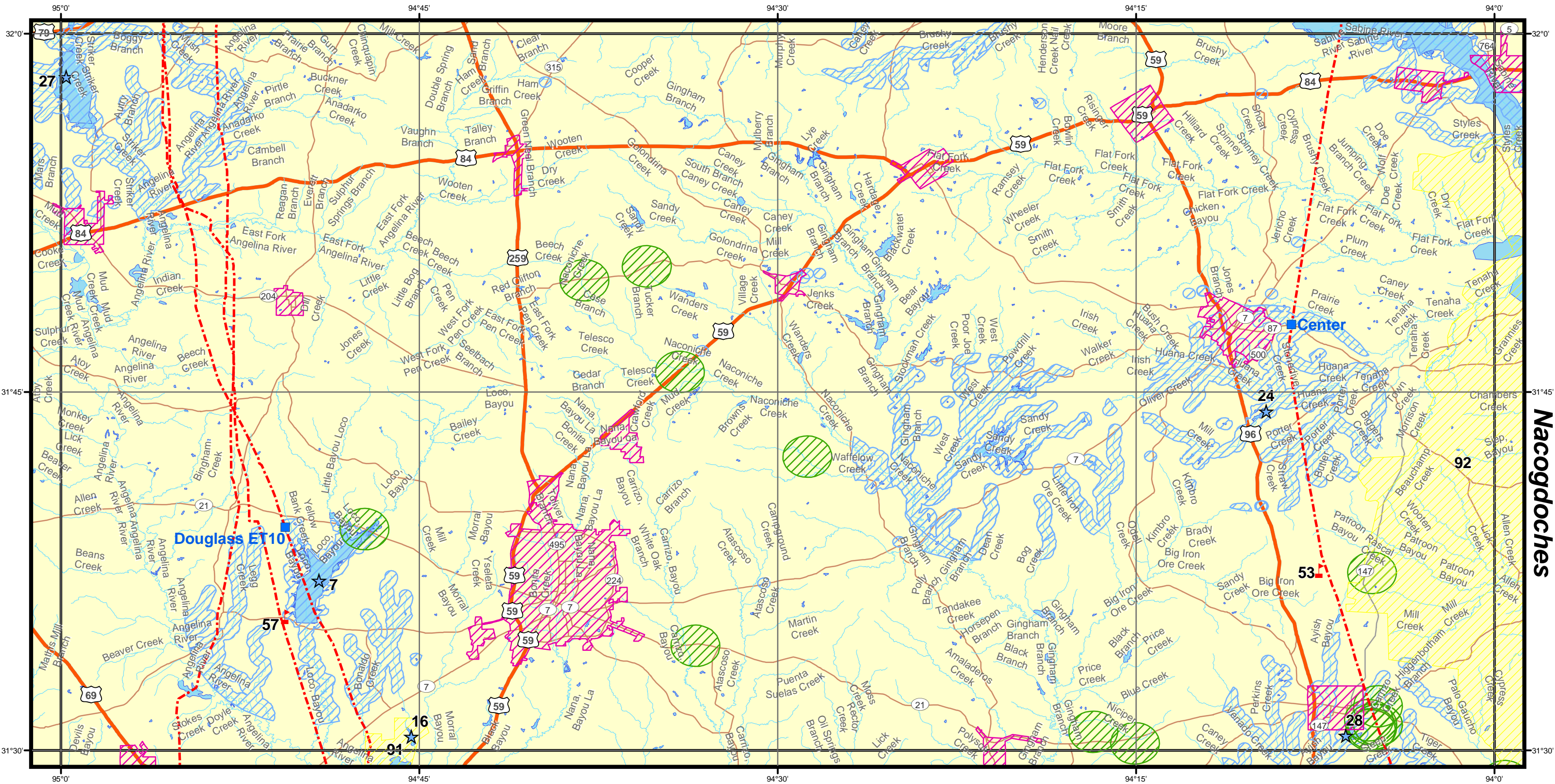


Monroe North



LEGEND

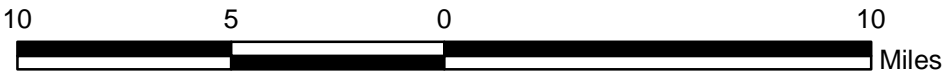
- Sunoco Pipeline L.P.
- Municipal Water Intake
- Schools
- OPA
- HPA
- ECO
- DWA
- Parks/Recreation Areas



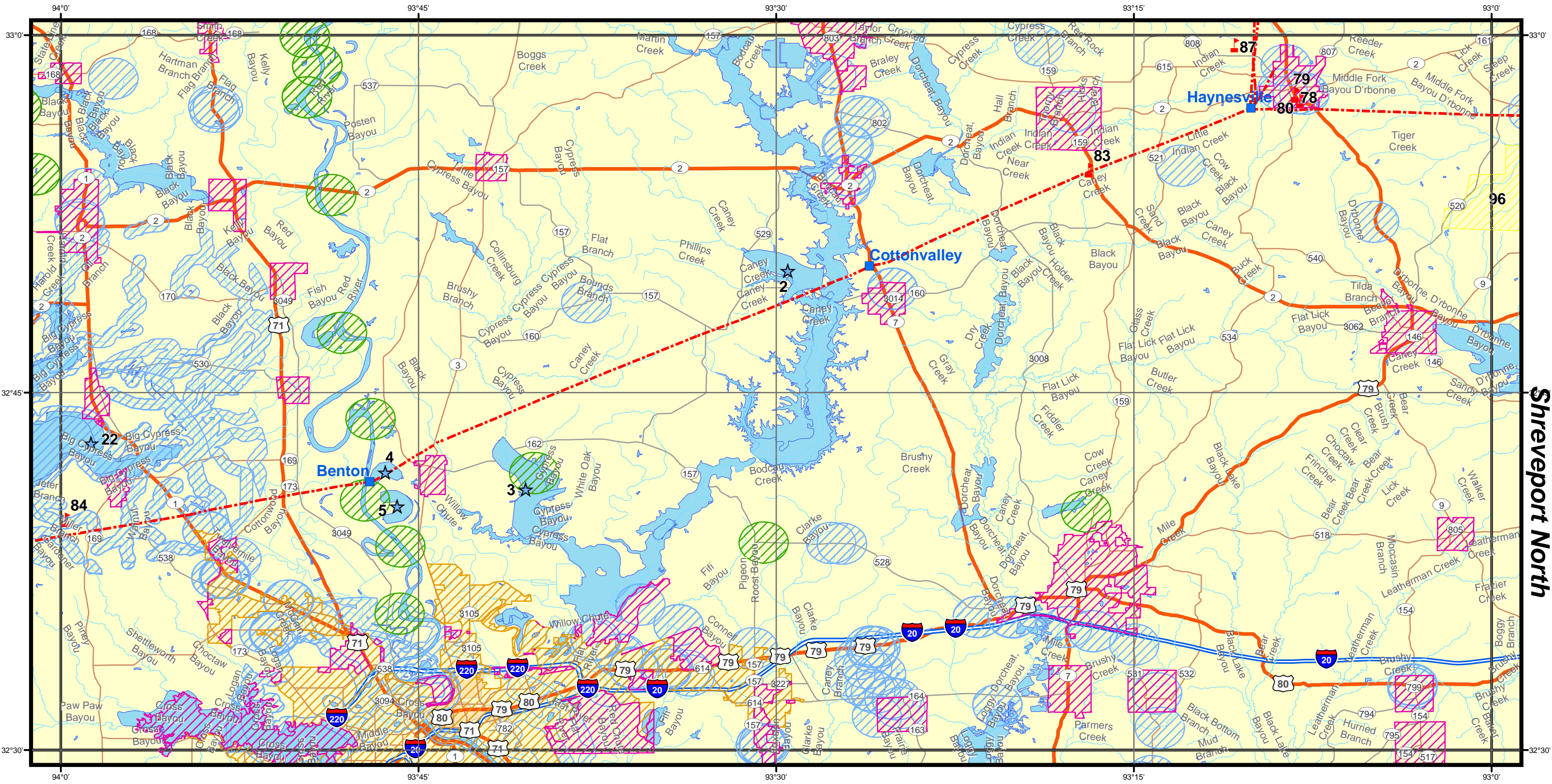
Nacogdoches



Nacogdoches



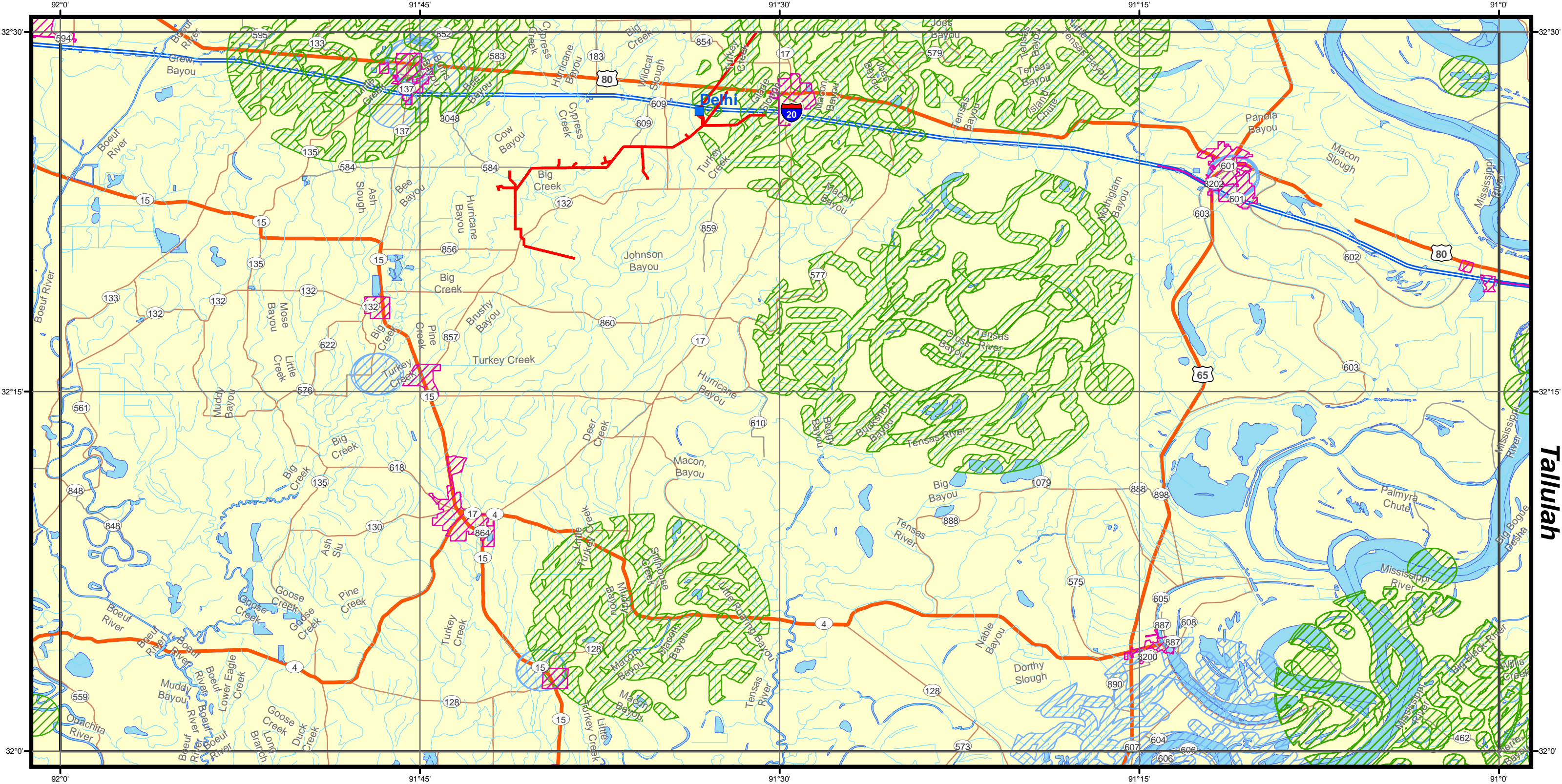
- Legend**
- Sunoco Pipeline LP
 - Stations
 - ★ Municipal Water Intake
 - ▲ Schools
 - OPA
 - ECO
 - DWA
 - Parks/Recreation Areas



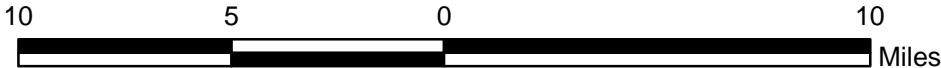
Shreveport North



- Legend**
- Sunoco Pipeline L.P.
 - ▲ Schools
 - ★ Municipal Water Intake
 - OPA
 - HPA
 - ECO
 - DWA
 - Parks/Recreation Areas



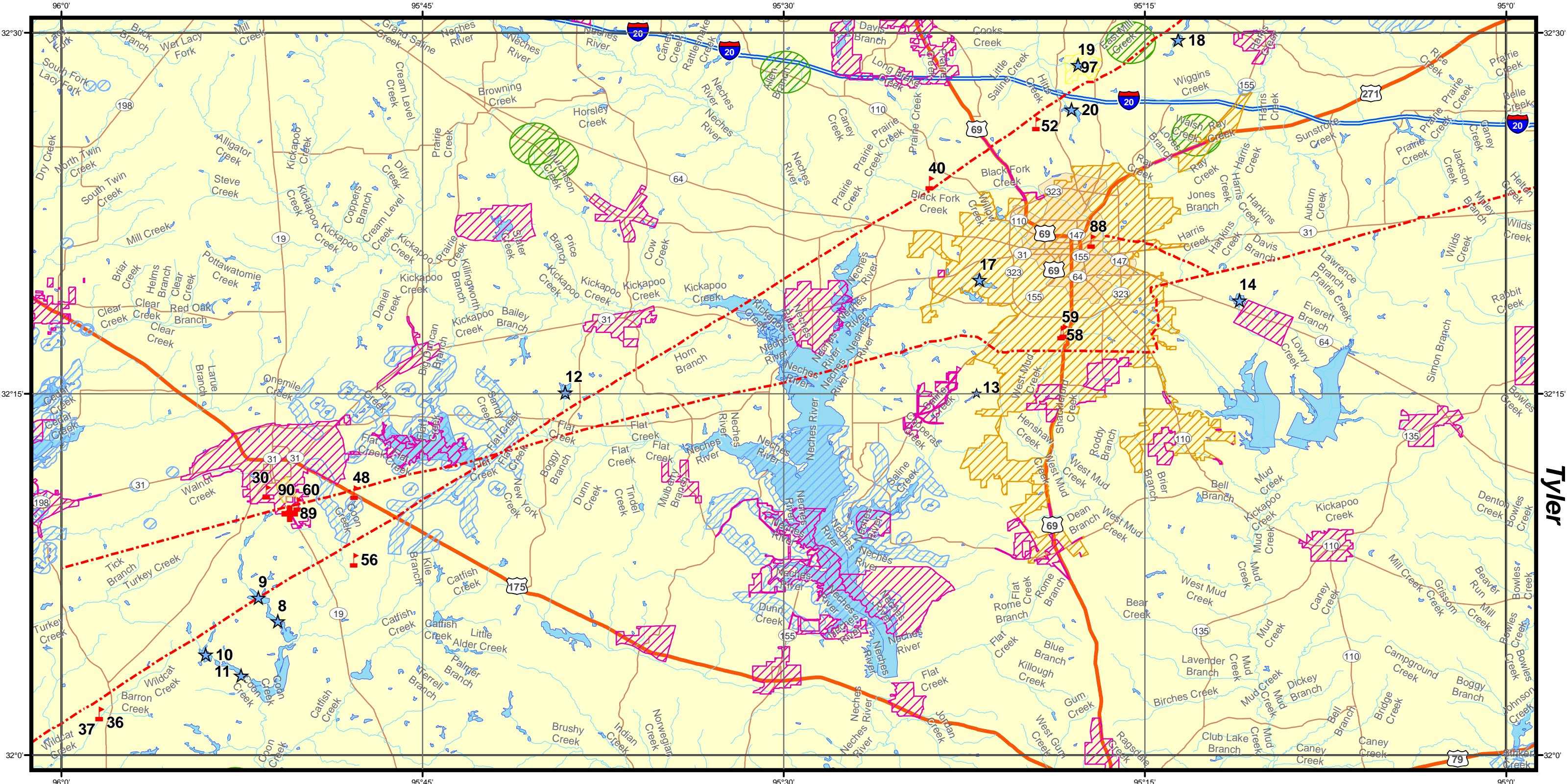
Tallulah



LEGEND

- Stations
- Sunoco Pipeline L.P.
- OPA
- DWA
- ECO

Mid-Valley: Longview District



Tyler












Sunoco Logistics

Tyler



Legend

-  Sunoco Pipeline L.P.  OPA
 Municipal Water Intake  HPA
 Schools  ECO
 Hospitals  DWA
 Parks/Recreation Areas

Municipal Water Intake

Label Num	Name
1	Lake Providence
2	Ivan Lake
3	Cypress Bayou Reservoir
4	Clear Lake
5	Cat Island Lake
6	Trinidad Lake
7	Lake Nacogdoches
8	Shelton Lake
9	Murchison Lake
10	Jonson Lake
11	Wilson Lake
12	Echo Lake
13	Unnamed Reservoir
14	Pleasant Acres Lake
15	Miller Lake
16	Alazan Lake
17	Bellwood Lake
18	Timber Lake
19	Tyler State Park Lake
20	Hitts Lake
21	Lake Gladewater
22	Caddo Lake
23	Lakeland Farm Lake
24	Center Lake
25	Corney Lake
26	Unnamed Reservoir
27	Lake Striker
28	City Lake

Schools

Label Num	Name
29	Abney High School
30	Bel Air Elementary School
31	Bramlette Elementary School
32	Bramlette School
33	Broadway Elementary School
34	Broadway School
35	Carlisle School
36	Cross Roads Elementary School
37	Cross Roads School
38	Daniels School
39	De Berry School
40	Dixie School
41	Elder School

42	Excelsior School
43	Forest Park Junior High School
44	Forest Park Middle School
45	Gaston School
46	Gladewater High School
47	Gladewater Middle School
48	Gum Creek School
49	Junior Moore Elementary School
50	Lincoln School
51	Mary C Womack High School
52	Midlothian Middle School
53	Neuville School
54	North Chapel School
55	Northcutt School
56	Pine Grove School
57	Pleasant Hill School
58	Rice Elementary School
59	Rice School
60	South Athens Elementary School
61	South Side School
62	Valley View Elementary School
63	Valley View School
64	Waskom Elementary School
65	Weldon Intermediate School
66	Weldon School
67	West Rusk High School
68	West Rusk Primary School
69	West Rusk School
70	Issaquena School
71	Adams School
72	Beekman Junior High School
73	Bonita Elementary School
74	Douglas School
75	Haynesville Elementary School
76	Haynesville High School
77	Haynesville Junior High School
78	Licksillet School (historical)
79	Mount Pleasant School (historical)
80	Rhone School
81	Saint Paul School
82	Spearsville High School
83	Spring Grove School
84	Ward Chapel School
85	Harvey Couch High School (historical)
86	State Line School (historical)
87	Wood School (historical)
88	East End School

Hospitals

Label Num	Address
89	East Texas Medical Center Athens

Parks

Label Num	Name
90	Cain Civic Center Park
91	Angelina NF
92	Sabine NF
93	Kisatchie NF
94	Kisatchie NF
95	Chemin A Haut State Park
96	Poverty Point NMON
97	Tyler State Park



APPENDIX F

TARGET SHEET

SITE NAME: SUNOCO PIPELINE LP FACILITY

CERCLIS I.D.: NONSITESPECI

TITLE OF DOC.: SUNOCO PIPELINE LP FACILITY RESPONSE
PLAN - LONGVIEW DISTRICT RESPONSE ZONE
- REVISED SEPTEMBER 2012

DATE OF DOC.: 08/19/2014

NO. OF PGS. THIS TARGET SHEET REPLACES: 10

SDMS #: 9559224 **KEYWORD:** 91.99

SENSITIVE ? ☒ **MISSING PAGES ?** ☐

ALTERN. MEDIA ? ☐ **CROSS REFERENCE ?** ☐

LAB DOCUMENT ? ☐ **LAB NAME:**

ASC./BOX #:

CASE #: **SDG #:**

THIS TARGET SHEET REPLACES APPENDIX F: SUNOCO
LOGISTICS DRILL/EXERCISE/INCIDENT RESPONSE PREP
SELF ASSESSMENT FORM - APPENDIX F IS BEING
WITHHELD UNDER FOIA EXEMPTION (b)(4) -
CONFIDENTIAL BUSINESS INFORMATION

COMMENTS :